

# FAMILY VIOLENCE EDUCATION PROGRAM APPLICATION, ORDERS AND DISPOSITION

JD-FM-97 Rev. 2-96 C.G.S. § 46b-38c

## INSTRUCTIONS TO APPLICANT

1. Prepare Application section and make 2 copies
2. Forward Original to Clerk of Court and one copy to the Prosecuting Attorney.
3. Retain a copy for your records.



**TO: The Superior Court of the State of Connecticut**

### APPLICATION

NAME AND ADDRESS OF ACCUSED (Number, Street, Town, and Zip Code)

DOCKET NO.

**CR-**

NAME AND ADDRESS OF COURT

CRIME(S) CHARGED (Name and Statute No.)

I, the undersigned, hereby make application and say:

1. That I have not previously been convicted of a "family violence crime," as defined by the General Statutes, which occurred on or after October 1, 1986;
2. I have not had a previous case assigned to the Family Violence Education Program;
3. I have not previously invoked or accepted accelerated rehabilitation under section 54-56e of the General Statutes for a "family violence crime," as defined in the General Statutes, which occurred on or after October 1, 1986;
4. I am not charged with a class A, class B, or class C felony, or an unclassified felony or offense carrying a term of imprisonment of more than ten years; and
5.  ("X" if applicable)

I am charged with a class D felony or an unclassified offense carrying a term of imprisonment of more than five years. (If this box is checked, an explanation of why you believe good cause exists to invoke this program on your behalf must be attached to this application.)

Further, I agree, if this application is granted, to:

1. The tolling of any statute of limitations and to waive the right to a speedy trial with respect to the crime(s) with which I am charged; and
2. Pay to the court the applicable fee for participation in the Family Violence Education Program, except that if I am indigent or unable to pay, I will file with the court an affidavit of indigency or inability to pay.

I realize that if I file an affidavit of indigency or inability to pay, the court may waive the program fee if it finds that I am indigent or unable to pay.

("X" one)  I intend to claim indigency or inability to pay

I intend to pay the applicable program fee

### DISMISSAL APPLICATION

I also request if this application for family violence education is granted, that, upon my successful completion of the program and compliance with all conditions imposed by the court, the court dismiss the charges against me.

WHEREFORE, THE UNDERSIGNED REQUESTS THAT THE APPLICANT BE GRANTED FAMILY VIOLENCE EDUCATION IN ACCORDANCE WITH THE GENERAL STATUTES.

I have read the above and understand it. I agree to the foregoing statements and affirm under penalty of perjury that they are true.

SIGNED (Applicant)	DATE SIGNED	IF MINOR, CONSENTED TO BY (Parent/Guardian)	DATE SIGNED
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### NOTICE

Unless good cause is shown, a person shall be ineligible for participation in the Family Violence Education Program if charged with a Class D felony or an unclassified offense carrying a term of imprisonment of more than five years.

### FIRST ORDER OF COURT

- The foregoing application is denied.
- The defendant is referred to the Family Violence Intervention Unit, and this case is continued pending the submission of the report of the unit to the court and to the date indicated below.

COURT HEARING DATE AND TIME	SIGNED (Judge/Assistant Clerk)	DATE SIGNED
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### FOR COURT USE ONLY

DATE VICTIM NOTIFIED (Use form JD-FM-96)	DATE OF FAMILY VIOLENCE INTERVENTION UNIT REPORT	
Affidavit of indigency or inability to pay <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE FILED	
CONTINUANCES (If Any) TO		
TO		

(continued...)

**OATH (Optional with the Court)**

The applicant appeared before the undersigned individual, designated by the clerk and duly authorized to administer oaths, and confirmed, under penalties of perjury, the statements made in the application and any statements attached to the application containing the reasons why the applicant believes good cause exists to invoke the program even though the applicant is charged with a class D felony or an unclassified offense carrying a term of imprisonment of more than five years.

SIGNED (Clerk's Designate, Duly Authorized)	TITLE	DATE
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**SECOND ORDER OF COURT**

THE COURT, having considered the foregoing application, the report of the Family Violence Intervention Unit and the statement(s), if any, of the victim(s) hereby finds:

- That the applicant is eligible for assignment to the Family Violence Education Program.
- That the applicant is charged with a class D felony or an unclassified offense carrying a term of imprisonment of more than five years and that good cause exists to invoke this program on behalf of such applicant.
- That the applicant is NOT eligible for assignment to the Family Violence Education Program.

WHEREFORE, the court orders:

- The foregoing application is DENIED.
- The foregoing application is GRANTED and the accused is released to the custody of the Family Violence Intervention Unit for the period indicated below. The following conditions are also imposed:

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- The court denies the application for waiver of fee.
- The accused is ordered to pay the clerk forthwith the applicable program fee.
- The court waives the fee having found that the applicant is indigent or unable to pay.

<input type="checkbox"/> FEE PAID	
Clerk's Initials	Date

CASE CONTINUED TO (Date and Time)	SIGNED (Judge/Assistant Clerk)	DATE
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**DISPOSITION (Complete One Side Only)**

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|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> PROGRAM SUCCESSFULLY COMPLETED AND CHARGES DISMISSED | <input type="checkbox"/> PROGRAM NOT SUCCESSFULLY COMPLETED<br><input type="checkbox"/> CONDITIONS NOT COMPLIED WITH |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|

SIGNED (Judge/Assistant Clerk)	DATE	SIGNED (Judge/Assistant Clerk)	DATE
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