

CONDITIONS OF COMMUNITY CONTROL/DIVERSION
Warren County Court

| | | | |
|----------|-------|----------|-------|
| Name: | _____ | Case No. | _____ |
| Address: | _____ | Phone: | _____ |
| | _____ | Cell #: | _____ |
| Email | _____ | Date: | _____ |

In consideration of having been granted Community Control and/or Probation by the Warren County Court, I agree by the terms and conditions set forth below.

STANDARD CONDITIONS:

- 1) I will keep all appointments with my Probation Officer, and meet with him or her as deemed necessary. I will not attend a probation meeting with knives or weapons of any kind.
- 2) I will not leave the State of Ohio without the permission of the Court or my Probation Officer.
- 3) I will comply with all my financial obligations, including all fines, costs and court-ordered restitution. I understand that my Community Control may be extended if my financial obligations are not met.
- 4) I will not change my residence from the address listed above without permission of my Probation Officer.
- 5) I will refrain from the commission of any criminal offense, including misdemeanor, felony and/or traffic offenses.
- 6) I will notify my Probation Officer of any of the following within 24 hours:
 - a. Change of telephone number or employment.
 - b. Arrest, indictment or other initiation of criminal and/or traffic charges against me. This does not include a citation for a speeding ticket.
 - c. Questioning by any law enforcement officer.
- 7) I will work regularly at a lawful occupation and support all legal dependents, if any, to the best of my ability.
- 8) I will not purchase, possess, use, or have under my control any narcotic drug or other controlled substance or illegal drugs or mood altering substances or intoxicants (i.e. K2, Spice, Bath Salts, Duster, etc); including any instrument, device or other object used to administer drugs or to prepare them for administration, unless it is lawfully prescribed for me by a licensed physician. I agree to inform my Probation Officer promptly of any such prescription. If a prescription is lawfully prescribed for me, I agree to take the medication as prescribed. I will not possess, consume or use any substance, device or item designed or advertised to interfere with the results of a valid drug screen to include dilution. I agree to submit to drug testing as directed by my Probation Officer; charges for drug screening sent to laboratory for confirmation may be added to fines/costs.
- 9) I will not use, possess or distribute any illegal narcotics, drugs, controlled substances or device used to administer any such drugs.
- 10) I will follow all instructions, verbal or written, given to me by my Probation Officer.
- 11) I will abide by all rules of the Warren County Jail, if I am ever in their custody for this case.
- 12) I will submit to field sobriety tests, breathalyzer or other drug/alcohol testing if requested to do so by a law enforcement or probation officer.
- 13) I will agree to sign a release of confidential information regarding any evaluation and/or treatment from any public or private agency, if requested to do so by my Probation Officer.
- 14) I will not operate a motor vehicle without proof of financial responsibility and either a valid license or court privileges.
- 15) I hereby consent to a search of my person, automobile or residence at any time.

SPECIAL CONDITIONS (applicable if checked):

- _____ 16) Obtain a Drug and Alcohol Evaluation and follow through with any recommended treatment. Your appointment for evaluation must be scheduled on or before _____.
- _____ 17) Obtain a Mental Health Evaluation and follow through with any recommended treatment. Your appointment for evaluation must be scheduled on or before _____.
- _____ 18) I will complete the following program on or before _____:
 72-Hour Driver Intervention Program and any recommended follow-up.
 Batterer's Intervention Program
 Women Who Resort to Violence
 Other: _____
- _____ 19) I will complete _____ days/hours of community service on or before _____.
 To be performed in the Community Litter Pickup Program.
- _____ 20) I will not purchase, possess or use alcohol or intoxicating liquors.
- _____ 21) I will not enter or remain upon the premises of any establishment that serves alcohol by the drink. **No Bars!!**
- _____ 22) I will not contact, directly or indirectly, or associate with the following people:

- _____ 23) I will make restitution to the victim(s) in this case in the amount of \$ _____ by _____.
- _____ 24) I will present a valid Driver License to my Probation Officer by _____.
- _____ 25) I will abide by each and every condition of any Temporary Protection Order issued with me as a named party.
- _____ 26) I will not enter or remain upon the premises of any state or county owned park, rest area or other recreational facility.
- _____ 27) I will not possess, use, carry, obtain or keep at my place of residence any deadly weapon. I agree to turn over any such weapons in my possession to law enforcement immediately.
- _____ 28) I will pay for all applicable electronic monitoring fees in a timely manner.
- _____ 29) I will complete any additional sanctions imposed upon me as a result of a probation violation.
- _____ 30) Other. _____

I HAVE READ OR HAD READ TO ME THESE CONDITIONS OF MY COMMUNITY CONTROL/PROBATION. THEY HAVE BEEN EXPLAINED TO ME AND ALL QUESTIONS HAVE BEEN ANSWERED TO MY SATISFACTION. I FULLY UNDERSTAND THESE CONDITIONS, AND I AGREE TO FOLLOW THEM. I UNDERSTAND THAT A VIOLATION OF ANY OF THESE CONDITIONS MAY RESULT IN THE REVOCATION OF MY PROBATION, OR MAY RESULT IN ADDITIONAL IMPOSED SANCTIONS INCLUDING CONFINEMENT.

Probationer Signature

Date

Officer Signature

Date