District Attorney General
Lisa Zavogiannis
Program Director
C. Brad Price
Treatment / Volunteer
Donna Vize, Volunteer/Marianne Cripps, Peer Case Manager

31ST JUDICIAL DISTRICT ADULT RECOVERY CT.

201 Locust Street, Suite 13
McMinnville, TN 37111
(931) 474-1071
www.warrencountytn.gov

Public Defender
John Partin
Probation
Sally Cantrell
Law Enforcement Liaisons
Derwin Adcock, Marc Martin

ADULT RECOVERY COURT JUDGE

Larry Bart Stanley, Jr.

APPLICATION FOR ADULT RECOVERY COURT

□ Drug Court □ DWI Court □ Adult Treatment Court Collaborative □Veterans Court

Date of Arrest: _____

1) Full Name:_____ Maiden Name:_____

2) Date of Birth:_____ **3)** Social Security #: _____

4) Sex: Circle Male Female **5)** Race: _____ Home Phone number: (_____)_____

6) Address:_____
Number Street City State Zip Code

7) Are you currently in jail? □ Yes □ No Name of Jail: _____
8) If Yes, when is your release date? _____

9) Why are you currently serving time? (Child Support, Violation of Probation, etc.)_____
_____

10) If not in jail, how can we contact you? _____
List the address and phone number for a relative_____

11) What are your current charges? _____

case numbers? _____

12) When is your pending court date? _____ What Court? _____

13) List any previous convictions and dispositions (any County or State): _____
_____

14) Are you currently or have you ever served in the Armed Forces? □ No □ Yes Branch: _____
14) List the name of your attorney: _____
15) Ever had a mental health diagnosis? □YES □ NO
16) Do you have an alcohol / drug addiction? □YES □ NO
List the type of drugs and how often you use each drug:_____
_____
How long have you had an alcohol or drug addiction?_____

Please return application to C. Brad Price, Adult Recovery Court Director
201 Locust Street, Suite #13
McMinnville, TN 37110
(931) 474-1071

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