ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS):		TELEPHONE NO.	FOR COURT USE ONLY	
ATTORNEY FOR (Name):				
SUPERIOR COURT OF CA	LIFORNIA, COUNTY OF SANTA	BARBARA		
☐ Santa Barbara Division 118 East Figueroa St. Santa Barbara, CA 93101	312 East Cook St. Bldg. G	Lompoc Division 115 Civic Center Plaza Lompoc, CA 93436		
PLAINTIFF: People of the State of California				
DEFENDANT:				
PRE-TRIAL AGREEMENT			CASE NUMBER:	
I understand that I am	n charged with a violation of one	or more of the following:		
PC 647(f)-Public intoxication B&P 25662-Minor in possession of alcohol B&P 25661-Possession of false identification H&S 11357(b)-Possession of marijuana (less than 1 oz.)		VC 23222(b) – Driv VC 23223(a) – Pas	VC 23222(a) – Driver with open container VC 23222(b) – Driver with less than 1 oz. marijuana VC 23223(a) – Passenger w/open container VC 23223(b) – Passenger w/ less than 1 oz.marijuana	
(including juvenile cou	urt). I promise that I will abstain luded. Based on these represe	from all possession and	alcohol or illegal drugs in any court /or use of alcohol and/or illegal drugs low me to attend one of the following	
College A	Youth Offender Progra Alcohol & Substance Educatio [You must meet program admis	on (CASE) Program, sp	onsored by U.C.S.B.	
3. If I plead "Guilty" or "No Contest" to the original charge, pay an administrative fee of \$300.00 and successfully complete either program, the original charge will be dismissed.				
abstention clause in	If however, I have a prior alcohol or drug related case that I have not disclosed to the court or if I violate the abstention clause in Paragraph 2 or if I do not complete the program within the time limit allowed, the judge will sentence me on the original charge by imposing an appropriate penalty.			
5. My responsibility is to enroll in the program within one week from today . I understand that I will be given twelve (12) weeks to complete the program and agree the time is sufficient. I understand that there is no extension to complete the program or for the payment of the \$300 fee.				
	sentencing hearing be postponed for sixteen (16) weeks so that I may have the opportunity to complete the			
Completion and payn must appear in court	7. I understand I have the option of not appearing on my scheduled hearing date if I submit my Certificate of Completion and payment of \$300 in full at least 10 business days prior to the hearing date. I further understand must appear in court on the date the judge sets if I have not completed the program or if I have not alread submitted the Certificate of Completion and payment.			
8. I fully understand and	accept the terms of this Pre-Tri	al Agreement. I agree to	abide by it and all program rules.	
Date:	ſ	Defendant:		