SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA			FOR COURT USE ONLY
☐ Santa Barbara Division 118 East Figueroa St. Santa Barbara, CA 93101 (805) 568-3959	☐ Santa Maria Division 312 East Cook St. Bldg. G Santa Maria, CA 93454 (805) 346-7550	☐ Lompoc Division 115 Civic Center Plaza Lompoc, CA 93436 (805) 737-7789	
PLAINTIFF: People of the State of California DEFENDANT:			
MISDEMEANOR DIVERSION ADVISEMENTS **(PEN. CODE, § 1001.95)**			CASE NUMBER:

INSTRUCTIONS: Read, date, and sign this form if you wish to participate in the Pre-Plea Misdemeanor Diversion Program pursuant to Penal Code section 1001.95, et seq. (the "Diversion Program"). The Court may grant pretrial diversion with respect to any offense permitted by Penal Code section 1001.95. If you successfully complete the Diversion Program, your case will be dismissed. If you do not successfully complete the Diversion Program, the Court will reinstate criminal proceedings. If you have any questions about your case, the possible sentence, or the information in this form, ask your attorney or the Court for clarification.

Defendant: Initial each statement below.

1. _____ I understand, as part of the Diversion Program, I will be required to successfully complete the terms, conditions, and programs specified by the Court, as set forth in the Misdemeanor Diversion Order. The Diversion Program will last no more than 24 months from the date of the referral to the program. I understand I will be responsible for paying any applicable program fees for programs required by the Court.

2. _____ I have been advised of, understand, and waive my rights to a speedy trial in this case.

3. _____ I understand I am pleading not guilty to the criminal charges against me in this matter.

4. _____I understand I must comply with any court-ordered protective order, stay-away order, or order prohibiting firearm possession, if applicable, during the Diversion Program.

5. _____ I understand that if I am arrested or charged with a new criminal offense during the Diversion Program, criminal proceedings in ***this*** case may be reinstated and I may be found to be no longer eligible for the Diversion Program.

6. _____I understand the Court may, after notice to me, schedule a hearing to determine if I am complying with each of the terms, conditions and programs of the Diversion Program. If the Court finds that I am not complying with each of the terms, conditions, and programs of the Diversion Program, the Court may end my participation in the Diversion Program and reinstate criminal proceedings.

7. _____I understand if I successfully complete the terms, conditions, and programs for the Diversion Program, my case will be dismissed. I also understand if I perform satisfactorily during the Diversion Program, and charges are dismissed, the arrest upon which the diversion was based shall be deemed never to have occurred, except as stated in statement 9, below.

PEOPLE OF THE STATE OF CALIFORNIA v. Defendant:	CASE NUMBER:

8. _____ I understand I am responsible for making full restitution to any victim(s) in this matter, as ordered by the Court. My financial ability to pay restitution will not bar me from participating in the Diversion Program, nor will it prevent me from successfully completing the Diversion Program.

9. _____ I have been advised and understand that, regardless of my successful completion of the Diversion Program, the arrest upon which the diversion was based may be disclosed by the Department of Justice in response to a peace officer application request, and that I am still obligated to disclose the arrest in response to a direct question contained in a questionnaire or application for a position as a peace officer, as defined in Penal Code section 830.

DEFENDANT'S STATEMENT

I have read and understand each of the foregoing statements. If I have an attorney, I have discussed each statement with my attorney. By putting my initials next to the statements in this form, I am indicating that I understand and agree with each statement I have initialed.

Dated: _____ _____

Defendant's Signature

ATTORNEY'S STATEMENT

I am the attorney of record for the defendant. I have reviewed this form with my client. I have explained each of items in this form to defendant, including all constitutional and statutory rights and obligations, and have answered all of defendant's questions.

Dated: _____ _____

Attorney's Signature

INTERPRETER'S STATEMENT

I, _____, have been duly sworn or having a written oath on file, certify that I truly interpreted this form to the defendant in the language noted below. The defendant stated defendant understood the contents in the form and then initialed and signed the form.

Language: ☐ Spanish ☐ Other (*Specify*): _____

Dated: _____ _____

Interpreter's Signature