

**NOTICE OF APPLICATION
FOR PRETRIAL ALCOHOL
EDUCATION PROGRAM**

JD-CR-167 New 10-14
C.G.S. § 54-56g, P.A. 14-110 § 1

**STATE OF CONNECTICUT
JUDICIAL BRANCH**
www.jud.ct.gov



Instructions To Defendant

1. Send the original of this application to the victim by Registered or Certified Mail.
2. Send a copy to the Clerk of Court.
3. Keep a copy for your records.

(Name, address, and zip code of victim)

┌

┐

└

┘

TO: The Victim named above

From (Name of defendant)	Address of defendant (Number, street, and town)
Judicial district or geographical area court	Address of court
Motor vehicle or boating violation(s) charged against the defendant	
Court hearing date and time _____ .m.	State's attorney (Name and telephone number)

The defendant named above has filed an application for the Pretrial Alcohol Education program under section 54-56g of the Connecticut General Statutes. The defendant is charged with the motor vehicle or boating violation(s) listed above.

If the court grants the defendant's motion and allows the defendant to take part in the Pretrial Alcohol Education Program, the court will order that the defendant be sent to the Department of Mental Health and Addiction Services where the defendant will take part in either an alcohol intervention program or a substance abuse treatment program. If the defendant successfully finishes the alcohol intervention or substance abuse treatment program, the court will dismiss the charges against the defendant.

As a victim of the motor vehicle or boating violation(s) listed above, you have a right to this notice and the right to tell the court if you think that the court should allow the defendant to take part in the Pretrial Alcohol Education Program.

If you object to the defendant's application (if you think the defendant should not be allowed to take part in the Pretrial Alcohol Education Program), you may come to the court listed above on the Court Hearing Date at the time shown above to tell the court why it should not grant the defendant's application.

You may call the office of the State's Attorney at the telephone number listed above any time before the Court Hearing Date and Time to find out if the date or time of the defendant's hearing on this application has changed.

Signed (Defendant)	Date Signed (Month, day, year)
--------------------	--------------------------------

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.

For Court Use

File Date

Superior Court Docket Number