

**San Juan County Drug Court**  
**Referral for Determination of Initial Eligibility**

Date: \_\_\_\_\_ Case: \_\_\_\_\_

Charge(s): \_\_\_\_\_

Defendant Name (as on charging document): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

**Referred by:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Prosecutor agrees to referral?** [ ] Yes **Deputy Prosecutor:** \_\_\_\_\_

**Defense Attorney:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Drug and/or Alcohol Use** [ ] **Mental Illness** [ ] **Other** [ ] \_\_\_\_\_

**Primary drug of addiction (including alcohol):** \_\_\_\_\_

**Briefly state basis for referral: (use additional page if necessary)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Eligibility Criteria:**

- Defendant charged in San Juan County Superior Court.
- Defendant must have no history of convictions for felony violent or sexual offenses, unless specifically agreed by the Prosecutor.
- Defendant must be diagnosed with a substance use disorder
- Defendant must acknowledge his or her substance use disorder/addiction
- There must be a causal connection or relationship between the substance abuse/addiction and the criminal activity that brought the defendant to the attention of the court.
- Defendant must reside in San Juan County (or be able to appear in court frequently).
- Defendant must be considered suitable and amenable to treatment.

**All information needs to be filled in for this referral to be valid and accepted.**