

**IN THE COURT OF COMMON PLEAS OF THE 39th JUDICIAL DISTRICT OF
PENNSYLVANIA - FRANKLIN COUNTY BRANCH**

COMMONWEALTH OF PENNSYLVANIA	:	Criminal Action
	:	
vs.	:	CA _____
	:	
	:	Charges:
_____	:	
Defendant	:	
	:	
	:	Pres. Judge Carol L. Van Horn

GOOD WOLF TREATMENT COURT PLEA COLLOQUY

- (1) I voluntarily request entry into Franklin County’s Good Wolf Treatment Court. I understand that entry into Good Wolf Treatment Court requires that I plead guilty to my criminal charges and the waiver of other important rights.
- (2) I agree to submit to and complete a diagnostic evaluation and treatment program dealing with my substance abuse problem as ordered by the Court. I further authorize the Franklin County Drug and Alcohol office to release my treatment information to the Court. Such information will not, however, be used by the District Attorney in any subsequent criminal proceeding. In addition, I understand that any statements made during Good Wolf Treatment Court sessions will not be used against me at any subsequent criminal proceedings.
- (3) I understand that I am entering a guilty plea to the following offenses, which carry standard range minimum sentences based on my prior record score as follows:

<u>OFFENSE</u>	<u>PRS</u>	<u>OGS</u>	<u>Standard Range</u>	<u>Max. Jail</u>	<u>Max. Fine</u>
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____

INITIALS: _____

- (4) If I do not successfully complete the Good Wolf Treatment Court program or comply with the conditions of this agreement, a hearing will be scheduled and may result in (1) a modification of my treatment plan; or (2) termination from the program resulting in a new sentencing hearing before the same judge presiding over Good Wolf Treatment Court.
- (5) I understand that by agreeing to enter the Good Wolf Treatment Court, I am surrendering my rights to:
- a. a jury trial;
 - b. confront and cross-examine Commonwealth witnesses;
 - c. file pre and post-trial motions;
 - d. raise any legal or factual defense to the current criminal charges; and
 - e. file an appeal-except as to those issues specified in the written plea colloquy.
- (6) I also agree as follows:
- a. I will report regularly, in person or in writing, as instructed by my Probation Officer and abide by the verbal or written instruction of my probation officer.
 - b. I will obtain permission from my Probation Officer before changing my approved residence and before leaving my home overnight. I understand that while participating in the Good Wolf Treatment Court I may not reside outside of Franklin County until I have permission from the Franklin County Adult Probation Department.
 - c. I will comply with all municipal, state and federal criminal laws, as well as the provisions of the Vehicle Code and Liquor Code. I will notify my Probation Officer immediately of any arrests or investigations by law enforcement agencies.
 - d. I will immediately advise all law enforcement agencies with which I come in contact that I am under the supervision of the Franklin County Adult Probation Department. I will act respectfully towards them at all times if I am a victim, a witness, or am being investigated or arrested by any law enforcement agency.
 - e. I will make an effort to obtain and maintain bona-fide employment to support my dependents. I will obtain permission prior to changing my employment. If I lose my employment I will immediately notify my Probation Officer and cooperate with any effort he or she may make to obtain employment for me.
 - f. I will not travel outside Franklin County without permission of my Probation Officer.

INITIALS: _____

- g. I waive extradition to the Commonwealth of Pennsylvania from any jurisdiction in or outside the United States where I may be found.
- h. I understand that failure to pay fines, court costs or restitution imposed by the court constitutes a violation of my participation in Good Wolf Treatment Court.
- i. I will not consume alcohol or any substance containing alcohol. I will not consume, possess, or have in my place of residence any alcoholic beverages. I may not frequent any establishment, whose primary business is the sale of alcoholic beverages, including bars, fire companies and social clubs.
- j. I will not possess or consume any Controlled Substance (illegal drugs).
- k. I will not abuse any over the counter or prescription medication. I will not take any prescription medication if it has not been prescribed to me by a licensed physician and approved by the Franklin County Adult Probation Department. Directions for ingestion of the product, if approved, must be strictly followed. I understand that if I am on prescribed medication, I am not to give/sell any of my medication to anyone. I will notify all medical/dental professionals that I am not allowed to consume or possess any addictive medication or any narcotics and I will provide my Probation Officer verification that I did so.
- l. I may not possess, use or have available to my control, or have in my place of residence any contraband such as: stolen property, drugs and drug paraphernalia, firearms (handguns, rifles, shotguns), ammunition, other weapons, and instrument of crime.
- m. I will refrain from any assaultive behavior which threatens or presents a clear and present danger to others. I will immediately notify police if I am a victim of an assaultive behavior, and file a report.
- n. I understand I must still abide by any policy and procedure changes that may occur in Good Wolf Treatment Court.
- o. I agree to abide by the curfew restrictions and to comply with the Court's order in every respect. I understand that curfew restrictions may be monitored by telephone calls or personal visits, day or night. I also agree to provide a urine sample or breath test upon request.

INITIALS: _____

- p. I will attend and successfully take part in a Drug and Alcohol treatment program and follow all recommendations until released by the treatment staff and my Probation Officer, including but not limited to: AA/NA meetings as directed, and providing treatment staff a drug/alcohol test upon request, understanding that I am not allowed to leave until I do so.
- q. I understand that if I abscond from Good Wolf Treatment Court a ***Bench Warrant*** will be issued for my arrest.
- r. I understand if any hazardous condition exists in my approved place of residence, I will be responsible for correcting the problem. A hazardous condition may include but is not limited to dangerous animals or unsafe living conditions.
- s. I will comply with the following special conditions imposed by my probation officer and my treatment counselor.

I will perform _____ hours of community service.

Other:

I have read and understand the above statement and my obligations and the rights I am surrendering. I am knowingly and voluntarily entering into Good Wolf Treatment Court.

Date: _____

Defendant: _____

ATTORNEY CERTIFICATION

I, _____, the attorney for the Defendant in the above case, who expressed a desire to enter Good Wolf Treatment Court, and do hereby certify that I have thoroughly explained the Good Wolf Treatment Court phases, conditions and requirements including each paragraph of the Good Wolf Treatment Court Colloquy to my client. My client fully understands the entire Good Wolf Treatment Court Colloquy. I have thoroughly discussed all the facts and circumstances surrounding the filing of the charges against my client and I have thoroughly explained each element of each crime, as well as all possible defenses to each charge to which my client has expressed a desire to enter a plea.

My client's guilty plea was made as a knowing, understanding, intelligent and a voluntary act. Further, I know of no reason why the plea would not be valid and binding.

Date: _____

Defense Counsel: _____

INITIALS: _____