IN THE CRIMINAL/CIRCUIT COURT FOR ______COUNTY, TENNESSEE

Case Number:	Count #	Counsel for the State:			
Judicial District: Ju	udicial Division:	Counsel for the Defendant:			
State of Tennessee		🗌 Retained 🔲 Pub I	Def Appt 🗌 Pri	vate Atty Appt	
vs.		Counsel Waived			
Defendant:	Alias:	Da	te of Birth:	Sex:	
		Relationship to Victim:			
State ID #: County Offender ID # (if applicable): State Control #:					
Arrest Date: Indictment Filing Date:					
ORDER OF DEFERRAL (JUDICIAL DIVERSION) Original Amended Corrected					
On the day of	, 20	, the defendant:			
Pled Guilty Pled Nolo Was Found Guilty By: Jury Verdict Bench Trial	Indicted Offense N Amended Offense Offense Date:	s (circle one) 1 st A B C D E Name <u>AND</u> TCA §:	y of Offense:		
 Upon review of the case, the court finds the facts stated above as well as the following (For Item 3, Check ONE Of The Two Boxes): 1. The defendant is eligible for deferral of the prosecution pursuant to Tennessee Code Annotated section (T.C.A.) 40-35-313; 2. The Tennessee Bureau of Investigation has certified (per attached certificate) that the defendant does not have a prior felony or Class A misdemeanor conviction; 3. The defendant was not charged with a violation of a criminal statute the elements of which constitute abuse, neglect or misappropriation of the property of a vulnerable person as defined in Title 68, Chapter 11, Part 10; OR The defendant agrees without contest or any further notice or hearing that the defendant's name shall be permanently placed on the registry governed by Title 68, Chapter 11, Part 10, whereupon a copy of this order shall be forwarded by the clerk to the department of health; 4. The defendant consents to T.C.A. 40-35-313 deferral, as evidenced by the defendant's signature below; AND 5. The defendant should be granted a deferral of charges pursuant to T.C.A. 40-35-313, and the defendant is placed on probation. The terms and conditions ordered by this court apply to the defendant's probation and are incorporated herein by reference thereto. 					
Probation Term: Total Length	Beginning Date _	Ending Date		_ Dupervised Dupervised	
Supervising Entity (unless otherwise provided to the defendant by the court): Name					
Phone Number Address					
Defendant's Contact Information (unless otherwise provided to the probation officer by the court): Phone Number					

Costs	Concurrent with:	Restitution	Pretrial Jail Credit Period(s):
\$ Sex Offender Tax (39-13-709)		Victim Name	From to
\$ Sex Offender Fine (40-24-108)			From to
\$ Drug Testing Fee (39-17-420)		Address	
\$ Treatment Expenses (40-35-313)	Consecutive to:		From to
\$ Supervision Fees (40-35-313)			
\$ Other:		Total Amount \$ Per Month \$	From to
		Per Month \$	

Defendant	ENTER this the day of, 20
JUDGE'S NAME	JUDGE'S SIGNATURE

Counsel for the State of Tennessee

Counsel for the Defendant