

**APPLICATION FOR DOMESTIC
VIOLENCE FAST TRACK TREATMENT PROGRAM**

Criminal Docket #: _____ OTN: _____

Criminal Charge(s): _____

Alleged Victim(s) of alleged crime and relationship to Defendant: _____

ANSWER ALL QUESTIONS

Name: _____ Age: _____

Address: _____

Phone (home): _____ Phone (cell): _____

Place of Employment: _____ Medical Insurance: Yes or No

Are you currently on Probation/Parole? _____ State or County: _____ In Jail? _____

Attorney name: _____ Phone: _____

Drug User: Yes or No Drug Choice: _____ Length of Use: _____

Alcohol User: Yes or No Frequency: _____ Length of Use: _____

Mental Health Issues/Diagnosis: _____

Physician: _____ Medications: _____

Caseworker: _____ Who referred you to this program? _____

Are you currently attending counseling or involved in any programs? Yes or No

If Yes, list agency: _____

VERIFICATION

I hereby verify that all answers contained herein are true and correct to the best of my information, knowledge and belief, and that false statements contained herein are made subject to the penalties of 18 Pa.C.S.A. § 4904, relating to unsworn falsification to authorities.

Signature of Applicant

Date

DISTRICT ATTORNEY RECOMMENDATION

Recommended: Yes or No

Not Recommended (Why?):

Comments:

District Attorney

Date

VICTIM RECOMMENDATION

Recommended: Yes or No

Not Recommended (Why?):

Comments:

Victim/Witness Coordinator

Date

JUDICIAL ACTION

Approved or Denied

COMMENTS:

Judge

Date

DOMESTIC VIOLENCE FAST TRACK TREATMENT PROGRAM

Upon agreement of the District Attorney, Victim/Witness Coordinator, and Defendant, and approval of the Court, the Defendant must abide by the following conditions:

1. Complete a Drug and Alcohol Evaluation and follow any recommendations of said Evaluation.
2. Attend and successfully complete the Men Against Abuse Program (MAAP) through Crossroads Counseling, Inc. or any other provider offering the Domestic Abuse Intervention Project/Duluth Model.
3. Report to Clinton County Adult Probation Office when instructed.
4. Obey the direction of any Adult Probation Officer.
5. Obey the law.
6. Submit to drug and alcohol testing at the request of any service provider and/or the Adult Probation Office.
7. Pay all costs associated with the above services.
8. Special conditions imposed by the Court, the Magisterial District Judge and/or the Adult Probation Office: _____

9. Appear at all court appearances.

Upon satisfactory completion of the above conditions and any required treatment, Defendant and/or Defendant's attorney must submit appropriate documentation to the Court, along with a Petition to Dismiss the Criminal Charge(s), to Remit all Costs and Expunge the Record.

District Attorney

Date

Victim / Witness Coordinator

Date

Defendant

Date

Defense Attorney

Date

Magisterial District Judge

Date

CROSSROADS COUNSELING, INC.

Outpatient Counseling Services

The Men Against Abuse Program is a 13 week program for perpetrators of domestic violence. The program meets two times per week, two hours per session. The program is designed to facilitate men in changing their abusive and violent behaviors which are often directed at their loved ones. It is based on the curriculum designed by the Domestic Abuse Intervention Project / Duluth Model. The group program focuses on 8 basic themes. The themes are:

1. Using intimidation
2. Using coercion and threats
3. Using emotional abuse
4. Using isolation
5. Using economic abuse
6. Using male privilege
7. Using children
8. Minimizing, denying and blaming

Domestic violence is about control, it is not about anger. Batterers use the above tactics, along with the threat of violence to control their partners' actions. The MAAP program combines didactic presentations, videos, homework assignments and routine self-analysis to challenge the batterer's views regarding their interpersonal relationships as well as their controlling behavior. All members are required to participate on a weekly basis and complete all assignments. Accountability is at the core of change.

Fees:

Initial consultation: \$40
Group sessions: \$25
Exit interview: \$40

Payments must be made at each session. Three unexcused absences will result in dismissal from the program and the participant will be required to re-start the program.

We accept referrals from a number of agencies including:

1. Voluntary referrals
2. Referrals by the PA Board of Probation and Parole
3. County probation offices
4. Plea agreements
5. County Children and Youth agencies

For admission, please call 570-893-1886.

501 East Third Street, Williamsport, PA 17701 phone: 570-323-7535 fax: 570-323-3790
8 North Grove Street, Suite Four, Lock Haven, PA 17745 phone: 570-893-1886
1-800-887-2720