

Case Number: _____ Date of Incident (MM/DD/YY): _____
Issue Date (MM/DD/YY): _____ Issue Attorney: _____
GJ/PH Attorney: _____ Trial Attorney: _____
Evaluator: _____ Defense Attorney: _____

Case Information

Charge(s):

Related Case(s):

Person Charged

Name: _____ DOB (MM/DD/YY): _____ Gender: _____

Race/Ethnicity: _____

Is the person charged in jail? Y N If so, how long have they been detained? _____

Conviction(s):

Arrest(s):

Victim(s)

Name: _____ Age _____ Gender: _____ Phone Number: _____

Relationship to Person Charged (if applicable) _____

Name: _____ Age _____ Gender: _____ Phone Number: _____

Relationship to Person Charged (if applicable) _____

Case Assessment

Legal Issues:

Evidentiary Issues:

Witness Issues:

Anticipated Defense:

Jury Appeal:

Impact

Why did the person commit this offense (substance abuse, mental health, financial difficulties, etc.)?

What will help the charged person address the reasons underlying the crime?

Can those underlying reasons be safely addressed in the community?

Have we learned about any potential conviction consequences (immigration, housing, employment, etc.)?

How can we help the victims heal from the inflicted harm (if applicable)?

Plea Negotiation History

Previous Offers and Dates Extended

_____	Date (MM/DD/YY): _____
_____	Date (MM/DD/YY): _____
_____	Date (MM/DD/YY): _____

Recommendation

Trial Attorney: _____ Team Leader: _____

Date plea extended (MM/DD/YY): _____

Result of plea offer:

Accepted

Declined

Counter-Offer

What is the counter offer? (if applicable)