

Court Ordered Programs, Inc.

Parole / Probation Officer Referral Form for Court Ordered Classes

DEFENDANT INFORMATION:

Full Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

REFERRING OFFICER:

Name: _____ Phone: _____ Email: _____

Court/Judge: _____ Case Number(s): _____

NOTIFICATION OF REFERRAL TO COMPLETE THE FOLLOWING:

You must register for the court ordered program(s) / assessment(s) indicated below at www.CourtOrderedClasses.com within 5 business days of _____. You must complete your INTAKE and Assigned Officer Consent Information so that your officer may monitor your progress through their portal.

ASSESSMENTS:

- | | | |
|---|--|--|
| <input type="checkbox"/> Domestic Violence Assessment | <input type="checkbox"/> Batterers Intervention Assessment | <input type="checkbox"/> Anger Management Assessment |
| <input type="checkbox"/> DUI / Alcohol Assessment | <input type="checkbox"/> Substance Abuse / Drug Assessment | <input type="checkbox"/> Parenting / Child Maltreatment Assessment |

PROGRAMS I:

- | | |
|--|--|
| <input type="checkbox"/> Domestic Violence Program _____ | <input type="checkbox"/> Batterers Intervention Program _____ |
| <input type="checkbox"/> Family Violence Program _____ | <input type="checkbox"/> Intimate Partner Violence Program _____ |
| <input type="checkbox"/> Anger Management Program _____ | <input type="checkbox"/> DEJ Court Diversion Program _____ |
| <input type="checkbox"/> Child Abuse Program _____ | <input type="checkbox"/> Child Abuse Endangerment Program _____ |

PROGRAMS II:

- | | |
|--|---|
| <input type="checkbox"/> Drug Awareness Program _____ | <input type="checkbox"/> Alcohol Awareness Program _____ |
| <input type="checkbox"/> High-Conflict Parenting _____ | <input type="checkbox"/> High-Conflict Divorce Classes _____ |
| <input type="checkbox"/> Civic Responsibility Program _____ | <input type="checkbox"/> Criminal Behavior Modification _____ |
| <input type="checkbox"/> Gambling Addiction Program _____ | <input type="checkbox"/> Cognitive Thinking Program _____ |
| <input type="checkbox"/> Responsible Thinking Program _____ | <input type="checkbox"/> Juvenile Behavior Modification * _____ |
| <input type="checkbox"/> Juvenile Betterment Program * _____ | <input type="checkbox"/> Juvenile Anger Mgmt Program * _____ |

PROGRAMS III:

- | | |
|---|---|
| <input type="checkbox"/> Parenting Program _____ | <input type="checkbox"/> Shoplifting / Theft Prevention _____ |
| <input type="checkbox"/> Co-Parenting Program _____ | <input type="checkbox"/> Divorce / Separation Program _____ |
| <input type="checkbox"/> Petty Theft Program _____ | <input type="checkbox"/> Minor In Possession Classes * _____ |

* Juvenile Court or Teen Programs

ADDITIONAL
NOTES OR
COMMENTS: _____

I acknowledge receipt of a copy of this directive and will comply with the instructions. I will register for the court ordered program(s) and or assessment(s) indicated above at www.CourtOrderedClasses.com My signature on this document authorizes any and all staff of Court Ordered Programs, Inc. to communicate with any and all entities and authorities of the Criminal Justice System regarding my reporting or failure to report, attendance or lack of attendance, results of testing, extent of cooperation with program personnel, fee payment status, compliance or non-compliance with program policies and rules and other information related thereto.

Defendant's Signature: _____ **Date Signed:** _____

Note to Officer: You can obtain a supervisory account at COP-i.com Officers. Please give copy to the defendant or fax it Fax: 661-296-2836 or e-mail it to our student liaison students@courtororderedclasses.com. You will notified of enrollment via "Proof of Enrollment" or failure to report and subsequent non-compliance regarding program requirements via "Non-compliance Report". Successful clients are issued "Completion Certificates". Interim status updates are available by logging into your monitoring portal, requesting "Progress Reports" or by contacting our office.