OFFICE OF THE STATE'S ATTORNEY
McHENRY COUNTY
PATRICK D. KENNEALLY

PLEASE CIRCLE WHICH PROGRAM YOU ARE APPLYING FOR

DEFERRED PROSECUTION PROGRAM
REQUEST FOR APPLICATION

DOMESTIC VIOLENCE DEFERRED PROSECUTION PROGRAM
REQUEST FOR APPLICATION

TODAY'S DATE: _____

CASE NUMBER: _____

DEFENDANT'S NAME: _____ D.O.B._____

DEFENDANT'S PHONE NUMBER: _____

NAME OF DEFENSE ATTORNEY: _____

NEXT COURT DATE: _____

PLEASE CHECK ONE

ENGLISH: _____ SPANISH: _____ OTHER (please list): _____

** Please bring to the State's Attorney's Office (Suite 150) after you complete this form**

MCHENRY COUNTY GOVERNMENT CENTER
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