

Chatham County Courthouse
133 Montgomery Street, Suite 600
Post Office Box 2309
Savannah, Georgia 31402
Telephone: (912) 652-7308
Fax: (912) 652-7328
Fax: (912) 652-7149



Committal Court Division
(912)652-7308
Juvenile Court Division
(912) 652-6700
Child Support Recovery
Victim Witness Assistance
Telephone: (912) 652-7329
(800) 477-5959

DISTRICT ATTORNEY
EASTERN JUDICIAL CIRCUIT
MEG HEAP

Community Service Referral Agreement

Name: _____ DOB: _____

Carefully read the following statement. It contains the rules for completing community service hours for the Pre-Trial Diversion Program set forth by the Office of the District Attorney.

I have been instructed to complete community service hours for the Pre-Trial Diversion Program. I understand the following rules and regulations that have been set forth. The following rules include:

1. Community service hours must be completed at an agency or organization that has been approved by the Office of the District Attorney.
2. Community service hours must be completed after my date of referral to the Pre-Trial Diversion Program. Any community service hours I may have completed prior to that date, cannot be applied to fulfill the Court requirements. Community service hours completed for the Pre-Trial Diversion Program may not be the same community service hours being completed for school, probation, and etcetera. If community hours completed for the Pre-Trial Diversion are the same hours that are completed for probation, those hours will not be accepted.
3. All community service hours must be verified by a State Court employee of the Office of the District Attorney. Verification will consist of written proof of hours completed on the "Community Service Log" provided. Community service hours completed on any other log will not be accepted unless it is a letter or log with the organizations information and logo.
4. I must appear at the community service site on time.
5. I must be appropriately dressed for the work to be performed.
6. I must cooperate fully with instructions given by my supervisor of the community service placement site.
7. I must be free of alcohol and all other drugs at the time I am performing community service.
8. If I fail to comply with the requirements of the site supervisor or violate and rules or expectations of the Office of the District Attorney, I will be asked to leave the community service site. I understand that this will be communicated to the Court, which may result in negative legal repercussions.
9. I agree to hold harmless the Office of the District Attorney of Chatham County and the community service site for an injury I may receive while completing the work of my community service hours ordered by the Court.
10. I understand that I must complete all community service hours ordered by the Court for the Pre-Trial Diversion Program prior to my first Status Check Court date, within 60 days of my initial Court date.

Signature

Date

Witness

Date