DIOTRICT COURT OF MARY! AND	Case/Citation No.			
DISTRICT COURT OF MARYLAND	Defendant			
PROBATION/SUPERVISION DOCKET	SID No.			
☐ Probation before Judgment (Criminal Procedure §6-220)	Tracking No.			
IT IS ORDERED THAT DEFENDANT:	Other Reference No.			
☐ Be Supervised by Community Supervision.☐ Be Supervised by Alternative Community Service:				
	Address			
Be Unsupervised.				
Probation begins on upon admission to	(JE AVAN ADJE DI ACELADEI HEDE)			
residential substance abuse program. Your first appointment with the supervising agency is and the place to report	(IF AVAILABLE, PLACE LABEL HERE.)			
to is	Convicted Count(s):			
Your failure to report could result in your arrest.	Sentence:			
A. Standard Conditions (1-10): All Standard Conditions	Part of Sentence Executed:			
All Standard Conditions except Nos.	Suspended:			
 Report as directed and follow your supervising agent's lawful instructions Work and/or attend school regularly as directed and provide verification 	treatment pursuant to HG §8-507			
to your supervising agent. 3. Get permission from your supervising agent before changing your home	Credit for Time Served:			
address, changing your job, and/or leaving the State of Maryland.	Length of Probation:Month/Year(s)			
Additional Comments:	Participate and pay for psychological counseling			
4. Obey all laws.5. Notify your supervising agent at once if charged with a criminal offense,	including jailable traffic offenses			
Additional Comments:				
6. Get permission from the court before owning, possessing, using, or having	g under your control any dangerous weapon or firearm			
of any description. Additional Comments:				
7. Permit your supervising agent to visit your home.				
8. Do not illegally possess, use, or sell any narcotic drug, controlled substance, counterfeit substance, or related paraphernalia. Additional Comments:				
9. Appear in court when notified to do so.				
10. Pay all fines, costs, restitution, and fees as ordered by the court or as directed by your supervising agent through a payment schedule.				
☐ Fine(s) of \$ paid through ☐ Community Supervision ☐ Clerk's Office ☐ Sheriff's Office				
☐ Court costs of \$ paid through ☐ Community Supervision ☐ Clerk's Office				
☐ Supervision fee of \$50/month paid through Community Supervision ☐	Supervision fee waived			
Restitution of \$ to	paid through			
☐ Community Supervision ☐ State's Attorney's Office by	Date			
Public Defender fees of \$ to the Office of the Public Defe	ender for counsel fees.			
Pay the following fees through Community Supervision or	:			
☐ Victims of Crime Fund \$ ☐ CICF costs \$	· • • • • • • • • • • • • • • • • • • •			
☐ The Division of Parole and Probation is hereby granted the discretion to refer the collection of funds it is authorized to collect to the State's Central Collection Unit without the need of further court approval.				
B. Special Conditions (11-35):				
11. Provide DNA sample as required by law by				
12. Submit to evaluation and attend and successfully complete mental hear				
13. Submit to, successfully complete, and pay required costs for evaluation, testing and treatment education, as directed by your supervising agent.				
14. Attend and successfully complete alcohol drug alcohol and d				
15. Enroll in, pay any required costs for, and successfully complete treatm	ent at			
16. Attend and successfully complete parenting class.				
17. Attend self-help group meetings per week for weeks. after weeks.	Attendance may be modified by your supervising agent			
18. Totally abstain from alcohol, illegal substances, and abusive use of any prescription drug.				
19. Apply for alcohol restriction on driver's license within 10 days of trial date for year(s)/month(s).				
20. Refrain from driving and/or attempting to drive after consuming alcohol.				
21. Attend Victim Impact Panel meetings when notified.				
22. Attend and successfully complete MVA Driver Improvement Program				
23. Attend and successfully complete MVA Alcohol Education Program.	(Social Drinkers Only)			

 $24. \ \square \ \ Have \ Ignition \ Interlock \ installed \ for \ \underline{\qquad} \ months \ and \ pay \ costs. \ \square \ Employment \ vehicle \ exempted.$

	Case No		
25. Complete hours of community service by	, under t	he direction of	
26. Attend and successfully complete domestic violer	nce counseling at		
	by	and	d pay required costs.
27. Have no contact with			
28. Do not enter or be found near			
29. Home confinement/detention to			
☐ Special conditions (e.g. doctor's appointments,	attending classes, etc.)		
Subtitle 7:	g into this State, was required to reg der, or sexually violent predator what a Sex Offender who is required to regn government, who is not a resident as full-time or part-time for a period g a calendar year, whether financial benefit; or institution, including a secondary sclutime or part-time student. It tate for a period exceeding 14 days evaluation and shall immediately evaluation and shall immediately excitately upon admission.	ister in another State to, before moving integrated in another State and we exceeding 14 days of the compensated, volutionally compensated, volutionally are an aggregate periodical threat the recommendation of aftercare planation, the victim stay-away and the compensation of the compen	; o this State, was ate, Jurisdiction, a ho enters this State: or for an inteered, or for ional institution, and exceeding ed program upon allert technology.
C. 34. Comply with special conditions of lifetime supe			
D. Recommendations to the Supervising Agency:			
35. Transfer supervision to	,	State of Maryland.	
Date		Judge	ID Number
	CONSENT		
I have read, or have had read to me, the above condition I understand that if I do not follow these conditions, I could	s of probation. I understand these cold be returned to court charged with	onditions and agree t a violation of probat	o follow them.
If I fail to abide by the above conditions, the court could been placed under probation. I have been notified and unde Criminal Procedure Article, §6-220, I waive my right to ap	erstand that by consenting to and rec	ceiving a stay of judg	n as if I had not gment under
I understand that my failure to pay fines, costs, and fees resulting in an additional collection fee as permitted by law	may result in my case being referre	d to the State's Centr	al Collection Unit,
I understand that Parole and Probation may impose Grac of probation, as authorized pursuant to Correctional Service	luated Sanctions upon me for any tees Article, §§ 6-111 and 6-121.	echnical violation of	the above conditions
Date		Defendant's Signatur	
Date of Birth		Address	
Telephone Number Cell Phone Number		City, State, Zip	
E-mail			
		Witness' Signature	
		Printed Name	