

**IN THE COURT OF COMMON PLEAS
OF THE FIFTY-NINTH JUDICIAL DISTRICT OF PENNSYLVANIA**

_____ Docket No. CP-_____-CR-_____-20_____
Defendant (Print Full Name) County Branch: []Elk []Cameron

Defendant's Address: _____ **Probation Officer Assigned:** _____

_____ **Probation Officer Telephone Contact:**
[]Elk County Probation: 814-776-5365
_____ []Cameron County Probation: 814-486-1559

**NOTICE TO DEFENDANT
ARD SUPERVISION**

As a result of the your intended entry into the **Accelerated Rehabilitative Disposition (ARD)** program in Elk or Cameron County, as applicable, you will be subject to a period of ARD supervision through the Adult Probation Office. Pursuant to 42 Pa. C.S.A. 9754 and 42 Pa. C.S.A. 9763, attached are the following reasonable conditions to your supervision, set forth below, which the Court finds necessary to ensure and assist you in leading a law abiding life. **You must strictly comply with and not violate any of the conditions of your supervision set forth below.**

The Court may terminate your ARD supervision upon proof of the violation of a specified condition of your supervision. If your supervision is terminated, the Commonwealth may proceed on the charges filed against you as provided by law.¹

¹ Pa.R.Crim.P. 318

**STANDARD TERMS AND CONDITIONS
OF ARD SUPERVISION**

1. You shall attend all appointments with your Probation Officer and report as directed to your Probation Officer.
2. You shall permit any Probation Officer of the Probation Office of Elk or Cameron Counties to enter your residence for the purpose of determining your compliance with ARD supervision.
3. You shall permit the search of your person, personal property (including telephone, computer or other electronic device), vehicle and/or place of residence where such place is legally under your control with any such search to be conducted by any Probation Officer of the Probation Office of Elk or Cameron Counties for the purpose of determining your compliance with ARD supervision.
4. You shall remain current and timely pay all financial obligations imposed upon you, including fines, costs and restitution or reparation.
5. You are prohibited from using any illicit or controlled substances without a valid prescription while on supervision. You shall submit yourself to any recognized test directed by your Probation Officer to determine use of alcohol or unlawful drugs or substances. If the test results in a positive reading for any substance not prescribed to you, you will be responsible for all charges related to such testing.
6. You shall participate in drug or alcohol screening and treatment programs, including outpatient or inpatient programs as directed by your Probation Officer.
7. You shall comply with all municipal, local, county, state and federal ordinances and laws, including the provisions of the Pennsylvania Motor Vehicle Code, and you shall immediately notify your Probation Officer with twenty-four (24) hours of you being arrested or receiving a citation, summons or criminal complaint.
8. You shall refrain from overt behaviors which threaten or present a clear and present danger to yourself or others or materially constitutes elements of a criminal offense.
9. You shall reside at the residential address that you have provided to the Probation Office of Elk or Cameron Counties and you shall not change your residential address without first obtaining permission from your Probation Officer. You shall notify your Probation Officer or the Probation Office of Elk or Cameron Counties in writing within forty-eight (48) hours of any changes in your residential address.
10. You shall not leave the Commonwealth of Pennsylvania without first obtaining permission from your Probation Officer.
11. If your Order of sentence provides, you shall participate in a community service program approved by your Probation Officer in accordance with your Order of sentence.
12. You shall pursue an education or vocation initiative or maintain employment while on probation/parole supervision. You must notify your Probation Officer within forty-eight (48) hours of any changes with your education or employment status. If you are unemployed while on probation supervision, you shall comply with all directives from your Probation Officer regarding your unemployment status and obtaining employment.
13. You shall undergo individual or family counseling as your Order of sentence provides or as you are

otherwise directed by your Probation Officer.

14. If your Order of sentence provides or your probation officer directs, you shall undergo an evaluation and/or assessment to determine if you in need of mental, emotional or behavioral health treatment. You shall strictly comply with any evaluation and/or assessment as it relates to your need for treatment, including therapy or counseling, for any mental, emotional or health diagnosis. You shall immediately comply with any request from your Probation Officer to sign any and all necessary releases of records and information regarding any evaluation and/or assessment completed upon you for your mental, emotional or behavioral health treatment and records and information related to your treatment, counseling, and therapy.
15. You shall do all other things as directed by your Probation Officer reasonably related to rehabilitation and supervision necessary to ensure and assist you in leading a law abiding life while on ARD supervision.

If you believe any of your rights have been violated as a result of your ARD supervision, you may submit a timely written complaint to:

Chief Probation Officer
Elk County Courthouse
PO Box 448
Ridgway, PA 15853

Chief Probation Officer
Cameron County Courthouse
20 E. 5th Street
Emporium, PA 15834

District Court Administrator
59th Judicial District of Pennsylvania
PO Box 416
Ridgway, PA 15853

**ACKNOWLEDGEMENT
OF TERMS AND CONDITIONS OF ARD SUPERVISION**

Prior to entering the Accelerated Rehabilitative Disposition (ARD) program, I have fully read and understand the Standard Terms and Conditions of ARD Supervision and I understand the penalties involved should I violate them in any manner. I verify the statement of facts contained in this verification are true and correct based upon my personal knowledge, information and/or belief and I make such statement of facts subject to the penalties of 18 Pa. C.S.A. §4904 (relating to unsworn falsification to authorities).

_____ **Date:** _____
Defendant

Print Name of Defendant