



ELLIS COUNTY VETERANS' TREATMENT COURT INITIAL APPLICATION

Please fill out this application completely, Applicants must additionally complete a VA 10-5345 form

APPLICANT'S PERSONAL INFORMATION

Name:

Date of Birth:

SSN:

Phone:

Current Street Address:

City:

State:

Zip Code:

E-mail:

Defense Attorney:

APPLICANT'S EMPLOYMENT INFORMATION

Current Employer:

Employer City, and State:

Annual Income:

Length of Employment:

Applicant's Pending Criminal Charges (*List all*):

APPLICANT'S CRIMINAL HISTORY

Prior Felony Arrests:

Prior Misdemeanor Arrests:

APPLICANT'S MILITARY BACKGROUND

Branch:

Rank:

Grade:

A

R

G

Start Date:

EAS:

Discharge Type:

Combat Tours / Hazardous Duty Assignments OCONUS:

Military Occupational Specialty (MOS):

APPLICANT'S MILITARY SERVICE-RELATED DISABILITY BACKGROUND

List of All Military Service-Connected Disabilities:

List of Rehabilitation or Other Recovery Programs:

Veteran's Administration (VA) Disability Rating Assigned:

Please return forms to:

Geraldine Gonzalez, Assistant County & District Attorney / geraldine.gonzalez@elliscountytexas.gov / 972-825-5201

Hailey Valley, Veterans' Treatment Court Court Coordinator / h.valley@elliscountytexas.gov / 972-825-5616

LEGAL AGREEMENT

I authorize the Ellis County Veterans Treatment staff to verify the information provided on this form, including any military, criminal, and employment history. I understand I will need to fill out a VA10-5345 form in addition to this application to complete my initial application. I further understand that other forms may be presented to me or my attorney and that these forms must be completed in order for me to participate in the Veterans Treatment Court. I HEREBY SWEAR AND AFFIRM that I am currently an active-duty member of the United States military or that I received an honorable discharge or general discharge from United States military service. I further HEREBY SWEAR AND AFFIRM that my military background, Social Security Number, and other information I have added to this form to be valid and correct. I understand that making a false statement on this form is a violation of the laws of the State of Texas that may be prosecuted as a separate criminal offense.

SIGNATURE OF APPLICANT

DATE