

Burlington County Prosecutor's Office Veterans Diversion Program

- What is the Veteran's Diversion Program?

The Burlington County Prosecutor's Office is proud to announce the launch of the Burlington County Veterans Diversion Program (VDP), which was established on May 1, 2017 when Governor Chris Christie signed into law P.L. 2017, Ch 42 ([N.J.S.A. 2C: 43-23 et seq](#)), and went into effect on December 1, 2017. Burlington County has a large population of veterans and active servicemembers. The Burlington County Prosecutor's Office (BCPO) recognizes that many of our veterans and servicemembers are impacted by mental health conditions such as post-traumatic stress disorder as a result of the service they have provided to our country. As such, the BCPO embraces the goal of the VDP, which is to support eligible veterans and active servicemembers in appropriate circumstances to enroll in services for counseling or rehabilitation when they have come into contact with law enforcement. The VDP specifically offers diversion from prosecution to treatment when an eligible servicemember is charged with the commission of certain offenses.

- Who is Eligible to Participate in the Program?

An "eligible servicemember" is defined as someone who is an active servicemember or has been discharged from service under conditions other than dishonorable. When an individual comes into contact with law enforcement for a criminal matter, they will be asked if they identify as either an active duty servicemember or a veteran. Once that identification is made, the individual may be considered for the VDP. The servicemember will be required to provide proof of active status or discharge.

In addition to the person's status as a servicemember, an eligible participant will either have a known mental health diagnosis or a suspected mental health issue. The Veterans Diversion Statute defines this as a "a mental disorder classified within the current version of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM) and includes, but is not limited to, anxiety disorders, cognitive disorders, post-traumatic stress disorder (PTSD), bipolar disorder, depression, adjustment disorders, schizophrenia and other psychotic disorders."

The County Prosecutor has the ultimate discretion to determine who will participate in the VDP. Factors that will be considered in making this determination include:

- The individual's criminal history, if any.
- The type of crime charged and the circumstances surrounding the commission of the offense.
- Whether or not the offense involved violence or the threat of violence.
- The impact of the offense on the victim, if any.
- The relationship between the person's diagnosis (or suspected diagnosis) and the offense committed.
- The amenability of the individual to rehabilitation.

- The likelihood that diversion will promote the person's recovery, prevent future behavior, and protect public safety.
- How Can Servicemember Status Be Verified?

Once the individual identifies as a servicemember, he or she must provide proof of that status. Typically this proof can be verified by documentation or identification. Examples included validly issued Common Access Cards (CAC), DD-214, Certificate of Release or Discharge from Active Duty, retired ID card, or a government issued Veterans Identification Card.

The BCPO suggests all veterans maintain a copy of their discharge documentation. Anyone, whether applying to the VDP or not, can request documentation via this website:

<https://www.archives.gov/veterans/military-service-records>

Applicants to the VDP will be required to show proof at the time of application OR within a reasonable amount of time after application. BCPO requests proof that documentation has been requested if it is not available at the time of application.

- What Offenses are Eligible for Diversion?

Only nonviolent offenses are considered for the VDP. Someone charged with a third or fourth degree offense, disorderly persons offense, or petty disorderly persons offense may be eligible for the program. When considering eligibility for any crime involving a victim, the BCPO shall consult the victim before the VDP is considered.

- How Does Diversion Occur?

Diversion can occur prior to the filing of criminal charges or after charges have been filed. Upon arrest, a law enforcement officer will ask whether or not the individual identifies as a servicemember or veteran. This information shall be recorded in the complaint, if filed. A law enforcement officer may deem an individual eligible and, after consulting with the BCPO, may refer the individual to the VDP in lieu of filing a complaint. However, that may only occur if the offense does not involve restitution, violence or threat of violence, a violation of a restraining order or protective order involving another person, or where the victim of the offense does not object to diversion. If those conditions are met, the County Prosecutor may authorize diversion prior to the filing of a complaint.

Even if the complaint is filed, an individual may apply for diversion. If the individual believes they are eligible they should submit an application as soon as possible (see below). At the time of the individual's first appearance before a Judge, he or she will be advised if application to the VDP would be appropriate. Once the individual has been advised, the application must be filed within 7 days.

For additional information, contact Burlington County Assistant Prosecutor Kathryn Ferris at 609-265-5035.

**BURLINGTON COUNTY
VETERANS REFERRAL APPLICATION**

NAME _____ DOB _____ SSN _____

PROSECUTOR'S FILE NUMBER _____

COMPLAINT OR WARRANT NUMBER _____

ARE YOU A VETERAN OR CURRENT SERVICEMEMBER YES NO

BRANCH OF SERVICE: _____

BURLINGTON COUNTY RESIDENT? YES NO

DATES OF SERVICE: _____

SERVICE IN COMBAT THEATER OF OPERATIONS?: YES NO

WHERE DID YOU SERVE: _____

WHAT WAS YOUR RANK: _____

NATURE OF DISCHARGE: HONORABLE DISHONORABLE GENERAL OTHER

DO YOU HAVE A CERTIFIED COPY OF YOUR DD FORM 214? YES NO (PLEASE PROVIDE COPY WITH APPLICATION)

IF "NO" WHAT STEPS HAVE YOU TAKEN TO OBTAIN YOUR DD FORM 214? _____

DO YOU HAVE OTHER DOCUMENTATION THAT VERIFIES YOUR DISCHARGE STATUS? YES NO

IF "YES" WHAT DOCUMENTATION? (PLEASE PROVIDE A COPY ATTACHED TO APPLICATION)

DID YOU SERVE IN COMBAT? YES NO WHERE? _____

ARE YOU RECEIVING VA BENEFITS? YES NO _____

DO YOU HAVE A VALID DRIVER'S LICENSE? YES NO

STATE OF ISSUE _____ D.L. NUMBER _____

CURRENT OCCUPATION OR EMPLOYER: NAME, ADDRESS, PHONE NUMBER, SUPERVISOR

MARITAL STATUS: MARRIED DIVORCED SINGLE RELATIONSHIP

DO YOU HAVE CHILDREN? YES NO IF YES HOW MANY/AGES

DO YOUR CHILDREN LIVE WITH YOU? YES NO IF NO WHERE AND WITH WHOM DO THEY LIVE?

DO YOU HAVE A MENTAL HEALTH DIAGNOSIS PROVIDED BY A CLINICIAN? YES NO

IF YES EXPLAIN: _____

PHYSICIAN: _____

DATE OF DIAGNOSIS: _____

CURRENT MEDICATIONS: _____

HAVE YOU BEEN DIAGNOSED WITH ANY OF THE FOLLOWING:

POST TRAUMATIC STRESS DISORDER (PTSD) WHEN? _____

TRAUMATIC BRAIN INJURY? WHEN? _____

MILITARY SEXUAL TRAUMA? WHEN? _____

SERVICE RELATED PSYCHOLOGICAL OR SUBSTANCE ABUSE? WHEN? _____

IF YOU HAVE NOT BEEN DIAGNOSED BY A CLINICIAN DO YOU HAVE A SUSPECTED MENTAL HEALTH ISSUE?

PLEASE SPECIFY:

HAVE YOU EVER ATTENDED TREATMENT? (AGENCY, ADDRESS, THERAPIST NAME)

(PLEASE LIST ALL INPATIENT AND OUTPATIENT FACILITIES OR HALF-WAY HOUSES)

DO YOU HAVE A HISTORY OF SUBSTANCE ABUSE? YES NO IF YES, EXPLAIN:

(PLEASE INCLUDE SUBSTANCES ABUSED, FREQUENCY OF USE, AGE WHEN BEGAN USE, LAST USE):

HAVE YOU EVER BEEN ARRESTED, CHARGED, CONVICTED, CITED OR HELD BY ANY LAW ENFORCEMENT OR JUVENILE AUTHORITIES IN THE UNITED STATES REGARDLESS OF WHETHER THE CHARGE WAS DROPPED OR DISMISSED OR YOU WERE FOUND NOT GUILTY OR WHETHER THE RECORD HAS BEEN EXPUNGED OR SEALED OR OTHERWISE STRICKEN FROM COURT OR POLICE RECORDS, ON ANY OCCASION, OTHER THAN THIS ARREST? NO YES IF YES, EXPLAIN: (INCLUDE NATURE OF ARREST, DATE WHEN ARRESTED, THE JURISDICTION WHERE YOU WERE ARRESTED, AND THE DISPOSITION OR OUTCOME OF YOUR CASE).

ARE YOU CURRENTLY ON BAIL ON ANY OTHER CRIMINAL MATTER IN THIS OR ANY OTHER JURISDICTION? YES NO IF YES, EXPLAIN: _____

BY SIGNING THIS APPLICATION, I AM INDICATING THAT I HAVE READ, OR HAD READ TO ME AND FULLY UNDERSTAND THE VETERANS APPLICATION DESCRIPTION. I UNDERSTAND AND AGREE THAT I AM VOLUNTARILY APPLYING TO THIS PROGRAM AND WILL WORK WITH MY LAWYER AND ANY MENTOR ASSIGNED TO ME TO SUCCESSFULLY COMPLETE TREATMENT AND ALL CONDITIONS NECESSARY TO COMPLETE THE PROGRAM SUCCESSFULLY.

SIGNATURE: _____ DATE: _____