



**RECOVERY  
COURTS**  
13TH JUDICIAL DISTRICT

Recovery Court • Veterans Treatment Court  
Honorable Judge Gary McKenzie  
18 North Madison Avenue, Suite 100  
Cookeville, TN 38501  
931.372.1003 (Phone) • 931.528.1206 (Fax)

**VTC Application for Admission:**

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

RACE: \_\_\_\_\_ SSN: \_\_\_\_\_

Branch of Service: (Circle One) ARMY    NAVY    MARINES    AIR FORCE    COAST GUARD

Component: (Circle One) ACTIVE    RESERVE    NATIONAL GUARD

Dates of Service: From: \_\_\_\_\_ To: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

**\*\*\* MUST ATTACH A COPY OF THE APPLICANTS DD FORM 214\*\*\***

**If not incarcerated:**

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

COUNTY WHERE CHARGED: \_\_\_\_\_

NEXT COURT DATE: \_\_\_\_\_ INCARCERATED WHERE: \_\_\_\_\_

ARREST DATE: \_\_\_\_\_

**Please list all current charges (attach a separate sheet if necessary); if charge is a VOP please list the original charge(s):**

CHARGE(S): \_\_\_\_\_ CASE #: \_\_\_\_\_

CHARGE(S): \_\_\_\_\_ CASE #: \_\_\_\_\_

CHARGE(S): \_\_\_\_\_ CASE #: \_\_\_\_\_

CHARGE(S): \_\_\_\_\_ CASE #: \_\_\_\_\_

LENGTH OF SENENCE: \_\_\_\_\_

**The above named individual requests admission to the 13<sup>th</sup> Judicial District Veterans Treatment Court Program. Further the applicant submits that he/she is eligible according to Section 16-22-102 Tennessee Code Annotated and Section 16-22-113 Tennessee Code Annotated because he/she:**

1. Is not a violent offender: \_\_\_\_\_ YES \_\_\_\_\_ NO
2. Is a substance abusing individual or is chemically dependent or both: \_\_\_\_\_ YES \_\_\_\_\_ NO
3. Is willing to participate in the program: \_\_\_\_\_ YES \_\_\_\_\_ NO

**Additional comments on why your client would be an appropriate candidate for the VTC Program:**

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**Attorney for Applicant:** \_\_\_\_\_

**Attorney's Contact Information:**

Email Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Fax Number: \_\_\_\_\_

*For District Attorney's Office Use Only:*

The District Attorney General's Office **CONFIRMS ELIGIBILITY** for the Veterans Court Program:    YES    NO

The District Attorney General's Office:

\_\_\_\_\_ RECCOMENDS PLACEMENT into the Veterans Treatment Court Program

\_\_\_\_\_ DOES NOT RECOMMEND

\_\_\_\_\_ TAKES NO POSITION

\_\_\_\_\_  
District Attorney General or Designee

\_\_\_\_\_  
Date

***Please return fully completed original application to the Recovery Courts Director, Julie Chambers.***