

COMMUNITY SERVICE VERIFICATION FORM

Chardon Municipal Court

Name: _____ Case Number: _____

Charge(s): _____

Forty (40) hours of community service to be completed by: _____, 201__

**** Please print legibly ****

Name of Facility: _____

Address: _____

Supervised by whom (include title): _____

Phone: _____ Fax: _____ Email: _____

Dates completed: _____

Hours completed: _____

Task(s) completed: _____

Signature of Supervisor verifying hours worked: _____

**** Please attach a business card or letterhead. ****

Memorandum to Community Service Providers

The Chardon Municipal Court has adopted a First Offender Program (FOP) for persons charged with their first criminal offense. The program is voluntary. The defendant may elect to participate in the FOP if eligible. If the defendant successfully completes the program, the charges are dismissed. The alternative, if the defendant chooses, is to proceed with the criminal prosecution.

One of the requirements for the FOP is 40 hours of community service. The Court does not order community service nor designate the organization for which it is to be performed. The defendant chooses the organization for which he or she wishes to volunteer. Your organization is responsible for choosing the activity, supervising the defendant and providing the court with a statement of the dates and hours worked.

Because community service is not ordered by the Court, neither the Chardon Municipal Court, the Police Prosecutor nor the City of Chardon accept liability for injuries to the defendant or personal injury or property damage caused by the defendant.

Please complete the form above and give it to the defendant when 40 hours of community service have been completed. Please call 440/286-8074 if you have any questions regarding this matter.

