

IN THE IOWA DISTRICT COURT IN AND FOR TAMA COUNTY

THE STATE OF IOWA,

PLAINTIFF,

VS.

DEFENDANT.

CONSENT TO FINDING OF CONTEMPT/ALTERATION/ REVOCATION OF PROBATION/ ADJUDICATION OF GUILT AND SENTENCING

CRIMINAL CASE NO. \_\_\_\_\_

I State to the Court that I understand that the State of Iowa has filed an Application for Rule to Show Cause (Contempt)/Application for Revocation of Probation/Application for Adjudication of Guilt and Sentencing. I now wish to consent to the State's Application. I further state I understand I have the following rights with regard to the Application:

- 1. To have a hearing on the State's Application.
2. To ask questions of the State's witnesses.
3. To ask questions of my own witnesses and subpoena witnesses to testify on my behalf.
4. To testify on my own behalf. However, no one could force me to testify, and the State could not call me as a witness in order to prove the violation(s) pending before the Court.

I understand that if I had a hearing the State would be required to prove to the Court by a preponderance of evidence that I violated the terms and conditions of my probation.

I understand that if I had a hearing the State would be required to prove to the Court beyond a reasonable doubt that I willfully and intentionally violated the terms of the sentencing, or No Contact Order previously entered in this case.

I further state that I have read the State's Application (and Report of Violation). I agree that the Application (and Report of Violation) is (are) substantially correct and admit that I have violated the terms of the sentencing order and/or my probation as set out in the Application. No one has made any promises or threats to make me consent to the State's Application. The decision to consent is my own voluntary decision. I understand that I have a right to be represented by an attorney as to this matter and that if I cannot afford an attorney the Court will appoint an attorney to represent me. To the extent I am represented by an attorney as to this matter, I state that I have discussed the Application with my attorney and that I am satisfied with the services and advise of my attorney. I agree that my attorney can appear for me and enter my consent to the State's Application to the Court. I also agree that the Court may impose sentence without my being present. I give up any rights I may have to challenge and/or appeal from any irregularities or errors in the way in which I have consented to the State's Application.

I understand that upon my consent to the State's Application:

If the State's Application is for Adjudication of Guilt and Sentencing, the Court can enter a conviction of record and sentence me to serve a sentence of not less than \_\_\_ days in jail and no more than \_\_\_ in \_\_\_ as well as pay a fine of no less than \$ \_\_\_ and no more than \$ \_\_\_, plus surcharge and court costs. I will also be ordered to repay court-appointed attorney fees.

If the State's Application is for Revocation of Probation, the Court can impose a sentence of up to \_\_\_ in \_\_\_. I will also be ordered to repay court-appointed attorney fees.

If the State's Application is for a finding of contempt, the Court can impose a fine of up to \$ \_\_\_ and/or impose a jail sentence of no less than \_\_\_ and no more than \_\_\_ days in jail.

I understand that there is a plea agreement as follows: \_\_\_\_\_

I further understand that any plea agreement with the County Attorney is not binding on the Court and that the Court can impose any sentence as set out above. I STATE TO THE COURT THAT I FULLY UNDERSTAND THE FOREGOING RIGHTS, THAT I HEREBY GIVE UP THOSE RIGHTS AND CONSENT TO THE STATE'S APPLICATION. Dated this \_\_\_ day of \_\_\_, 20\_\_.

Defendant's Signature

Address

Prosecuting Attorney

Defense Attorney