

Commonwealth of Pennsylvania : Magisterial District 23-\_\_\_\_\_  
 :  
 vs. : Docket No.:\_\_\_\_\_  
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APPLICATION FOR ACCELERATED REHABILITATIVE DISPOSITION (ARD)  
FOR A SUMMARY CASE

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Defendant is applying for ARD for a summary case and represents the following:

*(Please print the requested information.)*

1. Defendant's present address and telephone number:\_\_\_\_\_
2. Defendant's date of birth:\_\_\_\_\_
3. Prior Arrest(s): *(Circle one)* YES / NO \_\_\_\_\_
4. Date citation filed:\_\_\_\_\_
5. Law Enforcement Officer:\_\_\_\_\_
6. Offense:\_\_\_\_\_

**COPY OF CITATION MUST BE FILED WITH APPLICATION**

I am requesting that my summary case be considered for ARD. I understand that if the District Attorney denies my application for ARD, my summary case will then proceed in accordance with Chapter 4 of the Pennsylvania Rules of Criminal Procedure.

\_\_\_\_\_  
Signature of Defendant Date

This application for ARD has been \_\_\_\_ approved \_\_\_\_ denied.

Reason:\_\_\_\_\_

\_\_\_\_\_  
Signature of District Attorney Date