



## 406<sup>th</sup> Judicial District Court Adult Drug Court Program

### Referral Form Instructions

Please process the Drug Court Form as followed:

1. Complete and sign the Drug Court Referral form;
2. Attach copies of all pending criminal complaints and probable cause affidavits to the Drug Court referral form;
3. Forward entire packet to:

**Drug Court Administrator**  
4101 Juarez Street  
Laredo, Texas  
Phone: 956-523-4654  
Fax: 956-791-6325  
Email: [drugcourt@webbcountytexas.gov](mailto:drugcourt@webbcountytexas.gov)

#### \*AUTOMATIC DISQUALIFYING FACTORS

- A. An Offender currently on probation OR having a prior conviction within the past 10 years for any of the following offenses is ineligible:
  - Murder
  - Robbery (F1)
  - Voluntary Manslaughter
  - Assault by Prisoner
  - Kidnapping
  - Statutory Sexual Assault
  - Incest
  - Indecent Exposure
  - Involuntary Deviate Sexual Intercourse
  - Aggravated assault
  - Rape
  - Sexual Assault
  - Theft by Extortion
  - Burglary (F1)
  - Gang Affiliation
  - Arson (and related offenses)
- B. **NO** individual charged with illegally possessing a Firearm will be accepted.
- C. **NO** individual will be accepted if the amount of drugs possessed or delivered (per transaction) exceeds the amounts consistent with personal use.
- D. **NO** individuals with an extensive criminal history will be accepted.