

**AIM Court Referral Sheet**

Client Name \_\_\_\_\_ Race/Sex/DOB \_\_\_\_\_  
(Last) (First) (Middle)

Cause No(s). & Charge(s) \_\_\_\_\_

Date of Referral \_\_\_\_\_ Arrest Date \_\_\_\_\_ Court \_\_\_\_\_

Referring Attorney \_\_\_\_\_ PD Y/N \_\_\_\_\_

Referring Attorney Phone \_\_\_\_\_

Referring Attorney Email \_\_\_\_\_

Misd Cause No. & Charge (if from same transaction as felony) \_\_\_\_\_

Jail/Bond \_\_\_\_\_ If Jail, Book In No. \_\_\_\_\_

If Bond, Client Phone Nos. \_\_\_\_\_ Zip Code \_\_\_\_\_

Client Age \_\_\_\_\_ Job Y/N \_\_\_\_\_ HS diploma Y/N \_\_\_\_\_ GED Y/N \_\_\_\_\_

Client Speaks English(Y/N) \_\_\_\_\_

Mental Health Issues \_\_\_\_\_ Substance Abuse Issues \_\_\_\_\_

Is the Order to Appoint Counsel signed by you and your client attached Y/N \_\_\_\_ Note: You are still the Attorney of Record until notified the Order to Appoint Counsel has been signed by the presiding Judge of the AIM Program

**Please submit above request to Sylvia Araiza in Room A of Aux Court 7 on the 5<sup>th</sup> floor. This referral sheet DOES NOT constitute a Pass Slip. Continue to pass this case until you are contacted by a Representative of AIM Court. You will be notified if your client should proceed to AIM screening or if your client is not eligible.**

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**Below for RJU/ADA Use Only**

Forvus Page Attached Y/N \_\_\_\_\_ PC Affidavit Attached Y/N \_\_\_\_\_ Crim History Attached Y/N \_\_\_\_\_

Client Approved for AIM Screening Y/N \_\_\_\_\_ By ADA \_\_\_\_\_

If Not Approved, Reason \_\_\_\_\_

NO. \_\_\_\_\_

STATE OF TEXAS

§  
§  
§  
§  
§

IN THE 292<sup>nd</sup> JUDICIAL

vs.

DISTRICT COURT OF

\_\_\_\_\_

DALLAS COUNTY, TEXAS

**ORDER TO APPOINT COUNSEL**

On this \_\_\_\_\_ day of \_\_\_\_\_, 2018, this Court finds that the above named defendant is in need of counsel in order to participate in the Dallas County AIM Program. Therefore, this Court appoints the Dallas County Public Defender’s Office, which is staffed by licensed attorneys, to represent defendant in the above numbered case.

It is therefore ordered that \_\_\_\_\_ is discharged as attorney of record, and the Dallas County Public Defender’s Office is substituted as attorney of record for \_\_\_\_\_.

Signed on \_\_\_\_\_, 2019.

\_\_\_\_\_  
Brandon Birmingham  
JUDGE PRESIDING

Agreed to by Attorney of Record: \_\_\_\_\_

State Bar No.: \_\_\_\_\_

I, the above named defendant, am in agreement with this court’s order appointing the Dallas County Public Defender’s Office as my attorney of record IF I am accepted into the Dallas County AIM Program.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

Agreed by: \_\_\_\_\_

Assistant Public Defender  
Dallas County Public Defender’s Office  
State Bar No. \_\_\_\_\_