

IN THE SUPREME COURT OF THE STATE OF ARIZONA

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In the Matter of: )  
 )  
AMENDING ARIZONA CODE OF ) Administrative Order  
JUDICIAL ADMINISTRATION § 6-207: ) No. 2007 - 95  
UNIFORM CONDITIONS OF ) (Affecting Administrative  
SUPERVISED PROBATION ) Order No. 2007-85)  
\_\_\_\_\_ )

On November 29, 2007, the Court entered Administrative Order No. 2007-85 adopting amendments to the Arizona Code of Judicial Administration (ACJA) Section 6-207: Uniform Conditions of Supervised Probation, Appendix A, Uniform Conditions of Supervised Probation Form. Since adoption by Administrative Order No. 2007-85, a need for technical change has been identified. The form indicates a revision reference of 2004A, rather than 2008. In order to ensure use of the correct form and language, it is necessary to replace Appendix A, Uniform Conditions of Supervised Probation Form with the corrected form attached.

Now, therefore, pursuant to Article VI, Section 3, of the Arizona Constitution, and consistent with ACJA § 1-201 regarding technical changes to ACJA code sections,

IT IS ORDERED that Appendix A, attached to this Order, replace ACJA § 6-207, Appendix A found in the adopting Administrative Order No. 2007-85.

Dated this 13th day of December, 2007.

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RUTH V. MCGREGOR  
Chief Justice

**ARIZONA CODE OF JUDICIAL ADMINISTRATION**  
**Part 6: Probation**  
**Chapter 2: Adult Services**  
**Section 6-207: Uniform Conditions of Supervised Probation**

*[Added text is shown underlined, deleted text by ~~strikethrough~~.]*

**A. through D.** [No change.]

**Section 6-207: Uniform Conditions of Supervised Probation  
Appendix A  
Uniform Conditions of Supervised Probation Form**

**IN THE SUPERIOR COURT OF THE STATE OF ARIZONA  
UNIFORM CONDITIONS OF SUPERVISED PROBATION**

STATE OF ARIZONA

COUNTY/DIVISION: \_\_\_\_\_ / \_\_\_\_\_

VS.

CR: \_\_\_\_\_

§13-901.01 Offense:  1<sup>st</sup>  2<sup>nd</sup>  Ineligible

PID#: \_\_\_\_\_

OFFENSE(S): \_\_\_\_\_

*It is ordered suspending imposition of sentence and, under the supervision of the Adult Probation Department (APD),*

- PLACING** the defendant on probation for a period of \_\_\_\_\_  year(s)  month(s)  lifetime  
 to begin \_\_\_\_/\_\_\_\_/\_\_\_\_ or  
 upon absolute discharge from prison for a separate offense or  
 upon release from prison for felony DUI (\_\_\_\_ months; \_\_\_\_ days credit)
- CONTINUING** the defendant on probation  
 for a modified term  
 with a revised expiration date of \_\_\_\_/\_\_\_\_/\_\_\_\_

**THE DEFENDANT SHALL:** (Conditions Checked Also Apply)

1. Obey all laws.
2. Not knowingly associate with any person engaged in criminal activity or who has a criminal record without the prior written approval of the APD.
3. Report to the APD within 72 (or \_\_\_\_ ) hours of sentencing, absolute discharge from prison, release from incarceration or residential treatment, and continue to report as directed.
4. Reside at an address approved by the APD, provide safe access, and obtain prior approval before changing residence.
5. Submit to search and seizure of your person or property by the APD without a search warrant.
6. Not possess or control any firearms, ammunition, or prohibited weapons as defined in A.R.S. § 13-3101.
7. Not possess or use illegal drugs, toxic vapors, or controlled substances, or use or possess any prescription drugs without a valid prescription.
8. Report any law enforcement contact to the APD within 72 (or \_\_\_\_ ) hours.
9. Submit to drug and alcohol testing as directed by the APD and/or court.
10. Participate and cooperate in any program of counseling or assistance as directed by the APD and/or court.
11. Seek, obtain and maintain employment, if legally permitted to do so, and/or attend school as directed by the APD and advise of any change.
12. Not leave the state (  county) without prior permission of the APD.
13. Sign and submit any release, authorization, or consent required for the APD/court to exchange protected healthcare information related to the conditions of probation.
14. Provide a sample for DNA testing if required by law.
15. Comply with any written directive of the APD to enforce compliance with the conditions of probation.
16. Abide by the Judgment and Orders of Restitution, Fines and Fees in this case.

**UNIFORM CONDITIONS OF SUPERVISED PROBATION – PAGE 2 OF 2**

STATE OF ARIZONA COUNTY/DIVISION: \_\_\_\_\_ / \_\_\_\_\_  
 VS. \_\_\_\_\_ CR: \_\_\_\_\_

- 17. Not consume or drink any substance containing alcohol.
- 18. Not have any contact with the victim(s) whatsoever, unless approved in writing by the APD.
- 19. Complete \_\_\_\_\_ hours of approved community restitution at a minimum rate of \_\_\_\_\_ hours per month beginning  upon sentencing or  as directed in writing by the APD.
- 20. Not remain in or return to the United States illegally if deported or processed through voluntary departure.
- 21. Be incarcerated in the county jail for \_\_\_\_\_  days  month(s), beginning \_\_\_\_/\_\_\_\_/\_\_\_\_ with credit for \_\_\_\_\_ days served,  not to be released until \_\_\_\_/\_\_\_\_/\_\_\_\_. Report to the APD within 72 (or \_\_\_\_\_) hours of release from jail. Comply with all program rules.
  - Be screened for or  shall participate in Work Furlough.
  - Eligible for Work Release.
- 22. Register as a Sex Offender if required by law.
- 23. Be permitted to apply for Interstate Compact supervision in the state of \_\_\_\_\_. Do not proceed until reporting instructions are received and the APD issues a written travel permit.
- 24. Participate and cooperate in any counseling or assistance as directed by the APD pertaining to:
 

<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Mental Health
<input type="checkbox"/> ABE/GED	<input type="checkbox"/> Budgeting/Financial
<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Parenting
<input type="checkbox"/> Cognitive Skills	<input type="checkbox"/> Sex Offender
<input type="checkbox"/> Anger Management	<input type="checkbox"/> _____
- 25. Abide by the attached special conditions of probation:
 

<input type="checkbox"/> Intensive Probation	<input type="checkbox"/> Drug Court
<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> DUI Court
<input type="checkbox"/> Mental Health	<input type="checkbox"/> Gang
<input type="checkbox"/> Sex Offender	<input type="checkbox"/> _____
- 26. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**RECEIPT AND ACKNOWLEDGMENT:** *I hereby acknowledge receipt of the conditions of probation and any attached addenda. I understand that a violation of any of the conditions could result in the revocation of my probation and the court may impose sentence upon me in accordance with the law. As a further condition, I waive extradition for any probation revocation proceedings in this matter.*

Defendant	Date	Judge of the Superior Court	Date
Defendant's Address	Apt.	City	State
DISTRIBUTION: Original - Court, Copies - APD, Defendant		Zip	Phone

**Revision 2004A2008**