

KNOX COUNTY



**Community
Service
Program**

KNOX COUNTY

THIS GUIDE WAS PREPARED BY:

KNOX COUNTY
CLERK OF COURTS
CITY-COUNTY BUILDING
400 MAIN STREET, SUITE 149
KNOXVILLE, TN 37902

**YOU MAY CONTACT US IN THE
FOLLOWING WAYS:**

TELEPHONE

865-215-2492

**YOU MAY FIND ADDITIONAL
INFORMATION AT:**

WEBSITE

www.knoxcounty.org/criminalcourt/communityservice



Criminal Court for the State of Tennessee Knox County

Dear Knox County Citizens,

I hope you find this Community Service Guide helpful and easy to use.

Whether you are new to Knox County or have resided here for many years, this information is important for you to have. It covers our Community Service Program eligibility requirements, policies, as well as your responsibilities and rights as a program participant. I hope you will read this guide carefully, and keep it for future reference.

If you have any questions about this guide or the program, please feel free to call the Knox County Criminal Court. Contact information is provided on the guide's cover.

I wish you great success for full completion of the program, and I ask you to stand with me in our effort to ensure great service, high efficiency and positive attitudes for the organizations who agree to partner with the Knox County Community Service Program.

Sincerely,

A handwritten signature in cursive script that reads "Mike Hammond".

Mike Hammond

Knox County Clerk of Courts



www.knoxcounty.org/criminalcourt/communityservice

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**KNOX COUNTY CRIMINAL COURT
COMMUNITY SERVICE PROGRAM AFFIDAVIT OF INDIGENCE
KNOXVILLE, TENNESSEE**

STATE OF TENNESSEE

CASE/DOCKET NO. _____

vs.

DEFENDENT

Comes the defendant and, subject to the penalty of perjury, makes oath of the following facts (Please list, circle, complete, etc.)

1. Full Name: _____
2. List any other names ever used: _____
3. Birthdate: _____ Gender: Male Female
4. Address: _____
5. Telephone No(s): (Home) _____ (Work) _____ (Mobile) _____
6. Are you currently employed? Yes No If yes, Where? _____
7. How much money do you make? \$ _____ Per hour/day/week/month/year (**circle one**)
8. Do you have any income other than the income listed above? Yes No
If yes, list the total amount: \$ _____ (**weekly, monthly, etc.**)
List Source of Income(s): _____

Remember, possible sources include, but are not limited to the following: interest, gifts, AFCD, SSI, social security, retirement, disability, pension, unemployment, alimony, and workers' compensation.

9. Do you hold a HMIS (Homeless Management Information System) Card? Yes No
10. What is your total income after taxes \$ _____
11. Your last income tax return filed was in the year _____
Can you provide your last filed federal income tax return? Yes No
Your last return reflected an **adjust gross income** of \$ _____
12. If you are unable to provide you last federal income return filed, can you provide the last paystub you received? Yes No
13. Do you own property? Yes No

List all vehicles/vessels/real estate owned by me, solely or jointly, including, but not limited to: cars, trucks, motorcycles, farm equipment, boats, land, lots, houses, mobile homes, etc.

Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____
Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____
Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____
Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____
Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____
Description: _____	Value \$ _____	<input type="checkbox"/> Owned	Amt. Owed: _____

Other property valued over \$1,000: _____

13. All money available to me from any source:
Cash: _____
Checking, Saving, or CD Account(s) Balance: _____
Debts owed to me: _____

Credit Card(s) (Visa/MasterCard/American Express/Other):

Account Number: _____ Balance: _____ Credit Limit: _____
Account Number: _____ Balance: _____ Credit Limit: _____

14. Number of persons in your family/household: _____

15. Name and ages of all dependents: _____

Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____

16. My expenses are:

Rent/House Payment \$_____ per month	Groceries \$_____ per month
Electricity \$_____ per month	School Supplies \$_____ per month
Water \$_____ per month	Clothing \$_____ per month
Gas \$_____ per month	Medical & Dental \$_____ per month
Transportation \$_____ per month	Telephone \$_____ per month
Court Ordered Child Support: \$_____ per month	Child Care \$_____ per month
	Other \$_____ per month

17. Which legal representation listed below was used for your most recent offense?

Pro se (Represented Self) Court Appointed Attorney Paid for Attorney

18. Do you have any construction, carpentry or specific trade skills? Yes No

If yes, please describe: _____

19. Are you physically able to lift a minimum of 25 lbs.? Yes No

Acknowledging that I am still under oath, I certify I completed the above Affidavit truthfully, listing all assets in which I hold or expect to hold any legal or equitable interest.

I am financially unable to pay all fines and court costs.

I understand that it is a Class A Misdemeanor for which I can be sentenced to jail for up to 11 months and 29 days or be fined up to \$2500.00 or both if I intentionally or knowingly misrepresent, falsify, or withhold any information required in the affidavit. I also understand that I may be required by the Court to produce other information in support of my request to participate in the Knox County Court Community Service Program.

This _____ day of _____, 20____. _____

APPLICANT

Sworn to and subscribed before me. This _____ day of _____, 20____.

Notary Public: _____

My Commission Expires: _____

Reserved for Notary Seal

Community Service Timetables

Community Service involves working at a program approved nonprofit organization to satisfy debt(s) owed for court fees. Community Service may be granted by the Court using the following table:

Total Fines and Court Costs	Hours of Community Service Required
\$1 - \$100	8 hours
\$101 - \$200	16 hours
\$201 - \$300	24 hours
\$301 - \$400	32 hours
\$401- \$500	40 hours
\$501 - \$750	48 hours
\$751 - \$1,000	56 hours
\$1,001 - \$1,500	64 hours
\$1,501 - \$2,000	72 hours
\$2,000 - \$3,000	80 hours
\$3,000 - \$4,000	88 hours
Over \$4,000	Hours to be Determined by Program Manager

Important Program Requirements:

Approved program participants must begin community service hours within 30 days from approval date, as noted in the mailed Notice of Program Requirement Letter. Program participants must serve a minimum of 8 hours per month to maintain program eligibility. Failure to work at least 8 hours in a 30 day period from the last service date, will result in an immediate dismissal from the program.

Approved Program Partners:

- Knox County
- Knox Area Rescue Ministry
- Knoxville Lending Angels (*Construction/Carpentry Skills Required*)

Approved program participants will have the following timetable to complete the required Community Services hours, unless otherwise specified by the program manager:

Total Fines and Court Costs	Number of Days to Complete the Service Hours
\$1- \$500	Up to 180 Days (Six Months Total)
Over \$500	Up to 365 Days (One Year Total)

Program applicants must receive approval by the Judge and Program Manager before beginning Community Service hours. Once the program participant has completed the total number of hours they must submit one of the following:

1. Letter of Completion on Nonprofit Letterhead detailing the number of hours that the defendant has completed.
2. A completed timesheet signed by the program participant's supervisor at the approved program partner agency.

KNOX COUNTY CRIMINAL COURT
COMMUNITY SERVICE PROGRAM TIME SHEET

Community Service Partner: _____

Contact Name: _____ Title: _____

Contact Telephone: _____

Name of Individual Performing Community Service: _____

DOB: _____

Docket/Case number(s): _____

Total Hours Assigned: _____ Date to be completed by: _____

Date	Time In	Time Out	Total Hours	Subtotal Hours	Supervisor Initials	Participant's Initials

I certify that the above record is a true representation of the number of hours worked for above period.

Approved by:

 Signature of Community Service Partner Representative

 Signature of Program Participant Performing Community Service

Program Rules and Requirements

While performing community service, you will agree to:

- Contact the provider of choose to arrange community service as soon as possible;
- Arrive on time;
- Obey the site supervisor;
- Not leave the worksite without permission;
- Not carry any sort of weapon;
- Not use abusive language;
- Not deliberately destroy or deface any tools or property;
- Never accept any tips or cash from anyone in association with my community service;
- Wear appropriate clothing to work;
- Apply for authorization for extension of time if needed;
- Contact a Criminal Court Community Service Representative with any questions.

Important Program Requirements:

Approved program participates must:

1. Begin community service hours within 30 days from approval date, as noted in the mailed Notice of Program Requirement Letter.
2. Serve a minimum of 8 hours per month to maintain program eligibility. Failure to work at least 8 hours in a 30 day period from the last service date, will result in an immediate dismissal from the program.

NOTE: Please understand that failure to follow any of these rules or program requirements will result in a dismissal from the program.

Program Dismissal

Immediate dismissal may be made for cause including, but not limited to, your action or behavior that constitutes

- Insubordination (refusal to follow supervisor's instructions),
- Endangering your own health or safety or the health or safety of other employees or citizens,
- Excessive absence from scheduled service without authorization or notification,
- Theft, vandalism, or willful destruction of Partner Organization's property,
- Any violation of the Alcohol and Drug Policy,
- Any other infraction when dismissal is determined to be in the best interest of the Community Service Program and/or Partner Organization.

Program Resignation

If you want to resign from the program, you should notify your immediate supervisor if actively scheduled for service at the time of resignation. Failure to provide such a notice will be recorded in your program personnel file and may constitute grounds for permean program expulsion.

After you give notice, to your active service supervisor, notify a Community Service Program Representative of your assignment resignation from an approved program partner assignment.

Program Disqualifiers

The following examples represent, but are not limited to, circumstances where an applicant may be found ineligible to participate in the program:

1. Providing false information on a Knox County Criminal Court Community Service Program Affidavit of Indigence will automatically disqualify an applicant;
2. A conviction for a “violent felony”, including:
 - (A) First or second degree murder;
 - (B) Aggravated kidnapping or especially aggravated kidnapping;
 - (C) Aggravated assault;
 - (D) Aggravated child abuse;
 - (E) Robbery, aggravated robbery or especially aggravated robbery;
 - (F) Aggravated burglary or especially aggravated burglary;
 - (G) Carjacking;
 - (H) Sexual battery, sexual battery by an authority figure or aggravated sexual battery;
 - (I) Statutory rape by an authority figure or aggravated statutory rape;
 - (J) Rape, aggravated rape, rape of a child or aggravated rape of a child;
 - (K) Aggravated arson;
 - (L) Attempt, under § 39-12-101, to commit any of the offenses enumerated in subdivision (e)(3);
 - (M) Solicitation, under § 39-12-102, to commit any of the offenses enumerated in subdivision (e)(3);
 - (N) Conspiracy, under § 39-12-103, to commit any of the offenses enumerated in subdivision (e)(3);
 - (O) Criminal responsibility, under § 39-11-402(2), for any of the offenses enumerated in subdivision (e)(3);
 - (P) Facilitating the commission, under § 39-11-403, of any of the offenses enumerated in subdivision (e)(3);
 - (Q) Being an accessory after the fact, under § 39-11-411, to any of the offenses enumerated in subdivision (e)(3);
 - (R) Aggravated vehicular homicide;
 - (S) Criminally negligent homicide;
 - (T) Reckless homicide;
 - (U) Vehicular homicide; or
 - (V) Voluntary manslaughter.

Program Extension Request

If you need to request an extension for the number of days to complete your required service hours, your request must be submitted in a formal written request. All requests must be submitted within 30 days prior to your deadline date. Your deadline date will be the number of allowable days from your approval date noted in your mailed Notice of Program Requirement letter mailed to your mailing address recorded on the Knox County Criminal Court Community Service Program Affidavit of Indigence.

Alcohol and Drugs – Drug Free Workplace Policy

The Knox County Community Service Program is committed to a safe working environment and to making adequate provisions for the safety and health of its program participants.

Substance abuse can be reasonably expected to produce impaired job performance, lost productivity, absenteeism, accidents, wasted materials, lowered morale and diminished interpersonal relationship skills. Knox County Community Service Program is committed to maintaining a drug-free workplace.

Program participants **MUST NOT** manufacture, distribute, dispense, possess, or use illegal drugs or drug paraphernalia, nor may anyone be under the influence of such drugs while performing community service. Furthermore, you must not be under any degree of intoxication or odor from alcohol, or possess open alcoholic beverage containers while on duty, or on program partner's property.

Use of Prescription Drugs: You must not use or take prescription drugs above the level recommended by your prescribing physician and must not use prescribed drugs for purposes other than those for which they are intended.

FREQUENTLY ASKED QUESTIONS

Why should I volunteer?

If your [Knox County Criminal Court Affidavit of Indigence](#) is approved, participating in the Community Service Program will give you the opportunity to demonstrate a commitment to a cause and help to positively impact your community, while repaying your personal fine and court fee debt. Your participation can also provide satisfaction for strengthening your community in a meaningful way.

What is the time commitment required to volunteer?

Time commitments vary according to the total amount of fines and court costs you owe. A [Community Service Timetable](#) (Page 3 in the Community Service Program Guide) is provided for you to assess the number of committed hours needed to satisfy the total amount due.

How do I start the process for becoming a program participant?

Complete and submit a [Knox County Criminal Court Community Service Program Affidavit of Indigence](#). Knox County Deputy Clerks are available Monday – Friday (during hours of operation) to assist you in completing the Program Affidavit and to answer any questions you may have. After review of your Program Affidavit, and conducting a criminal background search and verification for all information provided, if indigence is officially declared by the Program Manager a Notice of Program Requirement letter will be mailed to your mailing address recorded on your Affidavit to notify you of program acceptance and stating your program start date.

What is the age and physical limitation requirements for program participants?

Program participants must be at least 18 years old. Upon approval and assignment to appropriate program partner, Program participants will be given assignment cards that list important instructions, program rules and any physical requirements for that assignment. You will be carefully matched with the most appropriate program partner based on your specific circumstances, physical abilities and any trade or specialized skills you may have.

What are the Community Service Program's Rules and Requirements?

The standard policies and principles by which program participants are required to abide are listed in the [Program Rules and Requirements](#) in the Program Guide (Page 5). The Program Rules and Requirements is used in an effort to maintain the high standard of conduct expected and deserved by Program Partners that enable the organization to continue to offer services required by those in need.

Why do I have to complete a background check and information verification to participate?

Background checks are conducted to help us achieve a more efficient and safer work environment for our Program Partners and all community service participants. The current design for the Knox County Criminal Court Community Service Program is based on the accurate and documented evidence that indigence has been verified.