

ELIGIBILITY REQUIREMENTS

- You are eligible if you have not been placed on court supervision (by court appointment or by participating in this or any other Traffic Safety Program for any other traffic violation issued within 12 months (365 days) of this violation.
- You are eligible if the NO COURT APPEARANCE REQUIRED box located on the bottom portion of your ticket has been marked.
- You are NOT eligible if you were under 18 years of age at the time your ticket was issued. You must appear in court with a parent or legal guardian to request supervision.
- If you are under 21 at the time of the violation, you are required to take the in-person class. If extenuating circumstances exist, call the Sauk Valley Community College Traffic Safety Program office.

WHEN YOU RECEIVE A TRAFFIC TICKET YOU HAVE 4 OPTIONS:

1. PLEA, PAY, and/or APPLY FOR COURT SUPERVISION ONLINE AT jodaviesscountyil.gov.

2. APPLY FOR THE TRAFFIC SAFETY PROGRAM BY MAIL

- Plead guilty.
- Complete the enclosed Sauk Valley Community College Traffic Safety Program registration form and Plea of Guilty with Court Supervision Application.
- Sign the copy of your ticket marked "Court Communication Copy" in the "Appearance Plea of Guilty and Waiver" section of the ticket, no later than 3 days before the date written on the front of the ticket.
- Send completed forms and fine and class fee payment (NO PERSONAL CHECKS) to the Circuit Clerk in the envelope provided.
- Attend the approved Traffic Safety Program class - must be completed within 160 days of the violation. Online must be completed within 30 days of notice by mail.
- Pay your fine and class fees with a single bank draft, money order, or certified check made payable to the Circuit Clerk for the total of your ticket (see your ticket for that cost) and the cost of your class. Payment is due no later than 3 days before the date written in the "Court Place/Date" section of the ticket, even if no court appearance is required.
- Personal checks WILL NOT be accepted.

You will receive your class information by mail from Sauk Valley Community College 60-90 days after your fine and class fee are paid. Maintaining contact with the program and completing your assigned class is YOUR responsibility. Sauk Valley Community College Traffic Safety Program is not responsible for lost mail.

OUT-OF-TOWN OR OUT-OF-STATE MOTORIST INFORMATION:

Sauk Valley Community College offers an online class for your convenience. If you elect to take a class at another location, the other location will charge you and you are still required to pay the Sauk Valley Community College Traffic Safety Program class fee. You must return your completion certificate to the SVCC Traffic Safety Program to receive credit for the class otherwise you will receive an incomplete and conviction on your driving record. If you choose another provider, please call our office at 815.835.6365 for further assistance.

3. PLEAD GUILTY BY MAIL

Follow the directions on the traffic ticket. The violation will eventually appear on your public driving record and will be recorded by the Illinois Secretary of State.

4. PLEAD NOT GUILTY

Follow the directions on the traffic ticket and go to court in person or have legal representation there. This may result in increased costs to you.

Sauk Valley Community College
Traffic Safety Program
173 IL Route 2 • Dixon, IL 61021
815.835.6365
trafficsafety@svcc.edu



TRAFFIC SAFETY PROGRAM
SAUK VALLEY COMMUNITY COLLEGE

TRAFFIC VIOLATION? KEEP THIS TICKET OFF YOUR RECORD WITH SVCC'S TRAFFIC SAFETY PROGRAM

15th Judicial Circuit Court Traffic Safety
Program Registration Form
Carroll, Lee, Jo Daviess, Ogle,
and Stephenson Counties
svcc.edu/traffic

CDL HOLDERS ARE NOT ELIGIBLE



SEE REVERSE SIDE FOR THE REGISTRATION FORM

"PLEA OF GUILTY" WITH COURT SUPERVISION

If you were under 18 years of age when your ticket was issued, do not complete this form. You must attend court in person, with a parent or guardian to request supervision.

If you are under 21, you are required to take the class in person. If extenuating circumstances exist, call the Traffic Safety Program Office.

Read this form carefully. Make sure you understand your responsibilities. Fill it out COMPLETELY, write LEGIBLY and use blue or black ink.

**Make sure the information is accurate.
Return this form with your fine, class fee, ticket,
and Traffic Safety Program registration form.**

I, _____ (print name)
certify that the following statements are true:

I REQUEST that the court place me on supervision for the enclosed traffic violation. My ticket does not require me to appear in court.

I understand that my supervision will last 180 days from the day the plea was recorded to the court, and it requires me to receive no other convictions for additional traffic violations during this time.

I have NOT been placed on court supervision (either by court appointment or by participating in this or any other Traffic Safety Program) for any other traffic violation within 12 months (365 days) of the current violation.

I understand that I am PLEADING GUILTY to the charge on this ticket, I WAIVE my right to a hearing by the court or jury and request court supervision.

I AGREE to complete the Traffic Safety Program within 160 days from the date of the violation.

I must return my certificate of completion from attending an out-of-area traffic safety school to SVCC, if applicable.

I UNDERSTAND my supervision will be summarily revoked and my guilty plea will be used to enter a conviction if:

1. I am found ineligible.
2. I do not complete the class within 160 days from the date of the violation.
3. I received another traffic violation within my supervision period.
4. I fail to return my certification of completion for attendance of a non-SVCC traffic safety school to the SVCC Traffic Safety Program office within the specified 160 days.

Signature

Date

SAUK VALLEY COMMUNITY COLLEGE TRAFFIC SAFETY PROGRAM REGISTRATION FORM

Return this form in the envelope provided with your fine, class fee, ticket, and plea of guilty application.
(PLEASE COMPLETE IN BLUE OR BLACK INK AND WRITE LEGIBLY)

This form also requires that you plead guilty and request supervision, either online or by mail.
When complete, either e-mail this form to circuitclerk@jodaviesscountyl.gov or mail to Jo Daviess County Circuit Clerks office at 330 North Bench Street Room 204, Galena, IL 61036.

If you have a CDL, DO NOT submit this registration form.
Call Sauk Valley Community College at 815.835.6365.

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ Apt. No.: _____ City & State: _____ Zip Code: _____

Date of Birth: (mm/dd/yyyy) _____ I am 21 or older

Driver's License Number: _____ Driver's License State: _____

Phone Number: _____

Alternate Phone Number: _____

Email Address: _____

Date of Ticket: (mm/dd/yyyy) _____ Ticket No.: _____

Class Options

\$50 - 4-hour In-person Classes

Select your choice in order of preference (1, 2, 3)

_____ Weekday Evening

_____ Saturday Morning

_____ Saturday Afternoon

\$75 Online (must be 21 years of age - online course will take between 4 - 6 hours with a test)

Other Location/Provider Contact SVCC Traffic Safety Program for more information

I require a sign language interpreter

4-hour Class Location

Select the most convenient:

SVCC Campus: Dixon

Savanna

Polo

Freeport

Your class assignment will be mailed and emailed from Sauk Valley Community College 60-90 days after fines/fees are paid.

FOR OFFICE USE ONLY

CASE NUMBER: _____