## SENTENCE MODIFICATION APPLICATION, MOTION AND ORDER

JD-CR-68 Rev. 5-16 C.G.S. §§ 53a-39, 54-227 P.B. § 43-21

Inmate number

### Instructions to Defendant

- 1. Fill out 3 copies of this form, and file 2 copies with the Clerk at the court where you were sentenced.
  - If your prison sentence, including any time that was suspended by the judge, is for more than 3 years, you **must** get the State's Attorney to agree to your application and sign this form **before** you file it with the court.
  - If you are in prison now, you **must** also attach a completed Notice of Application form (JD-VS-3) to this application.
- 2. Give the third copy to the State's Attorney for your case.
- 3. Do not use this form to ask the court for more jail credit.

STATE OF CONNECTICUT SUPERIOR COURT



#### Instructions to Clerk

- 1. Do not accept this form if the only relief requested is additional jail credit, if a defendant with a sentence of 3 years or more has not gotten the signature of the State's Attorney, or if an incarcerated defendant has not attached a completed Notice of Application form (JD-VS-3).
- 2. Stamp form on filing. File original as a pending matter. Give the copy to
- the Presiding Judge.
  3. After Judgment: Prepare copies of judgment, and distribute as follows:
  Original and 1 copy to the Records Center (for filing with original Information and under date of this order)
  - · One copy to defendant or defendant's attorney
  - . If the defendant is incarcerated, 1 copy to the Records Office of the defendant's correctional facility
  - If the defendant is placed on probation or the existing probation is modified, 1 copy to Adult Probation

Docket number	State of Connecticut vs.	Geographical Area number	Place of sentencing (Town)	Date of sentencing
Crime(s) of which the defendant was	Date of birth			

Original sentence (Include any part of the sentence that was suspended and any fine ordered. If original sentence was modified before, say when and include the new sentence.)

Name of Judge entering original sentence Name of jail Date jail sentence began	Amount of fine paid, if any
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# **Motion For Modification**

I, the Defendant or the Attorney for the Defendant signing below, affirm that this motion does not apply to any part of a sentence that is a mandatory minimum sentence for an offense that may not be suspended or reduced by the court, and I ask that the sentence of the defendant be modified (changed) by:

suspending execution of the unexecuted portion of the jail sentence.

### Complete the following questions

- a) Was the defendant sentenced to a definite sentence of more than three years?
- b) Was a motion for a modification of sentence previously filed in this case? c) Is the Defendant presently in the custody of the Department of Correction?

No No No

Yes	(If yes, the state's atty. must sign below agreeing to seek a review of sentence
Yes	(Date filed)
Yes*	

\* If yes, a completed form JD-VS-3, Inmate Notice of Application, is attached to this application as proof of notice to the Office of Victim Services and to the Victim Services Unit within the Department of Correction.

Reason for request (Attach sheet, if necessary)

Dated at (Town)	On <i>(Date)</i>	Signed (Defendant or Attorney for Defendant)
I agree with oppose the defendant's request to seek review of the sentence.	On <i>(Date)</i>	Signed (State's Attorney)(Complete if defendant sentenced to more than 3 years)

### Judgment

The motion having been presented to and considered by the Court, is:

Denied

Granted, good cause having been shown, and the sentence is modified as follows:

Judgment on motion entered at (Town)	On (Date)	By order of the court (Name of Judge)
	- ( )	,

Signed (Assistant Clerk)