

Mitigation Considerations – Plea Sheet

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| <input type="checkbox"/> Age | <input type="checkbox"/> What do the character references? |
| <input type="checkbox"/> Early / Timely / Late Plea? | <input type="checkbox"/> Circumstance of the offence |
| <input type="checkbox"/> Assistance to police | <input type="checkbox"/> Parity of offending |
| <input type="checkbox"/> Admissions? | <input type="checkbox"/> Consequence of the offending on the client |
| <input type="checkbox"/> Plea to a weak crown case? | <input type="checkbox"/> Remorse / Letter of remorse? |
| <input type="checkbox"/> Living arrangements | <input type="checkbox"/> Any extra-curial punishment? |
| <input type="checkbox"/> Marital status | <input type="checkbox"/> Further offending? |
| <input type="checkbox"/> Family circumstances | <input type="checkbox"/> How did they perform on bail? |
| <input type="checkbox"/> Support of family? | <input type="checkbox"/> How did they go on existing orders after being charged? |
| <input type="checkbox"/> Trauma they may have experienced? | <input type="checkbox"/> Have they performed well on particular orders in the past? |
| <input type="checkbox"/> Impact of penalty on family | <input type="checkbox"/> Restitution? |
| <input type="checkbox"/> Level of education | <input type="checkbox"/> Presentence custody? |
| <input type="checkbox"/> Qualifications | <input type="checkbox"/> Conduct while on remand? |
| <input type="checkbox"/> Employment history | <input type="checkbox"/> Any time in isolation? |
| <input type="checkbox"/> Impact on employment? | <input type="checkbox"/> Loss of privileges? |
| <input type="checkbox"/> Most recent employment | <input checked="" type="checkbox"/> Courses they have done in custody? |
| <input type="checkbox"/> Letter from employer? | <input type="checkbox"/> How did they contribute to the offending? |
| <input type="checkbox"/> Future plans? | <input type="checkbox"/> What is the ideal sentence structure? |
| <input type="checkbox"/> Physical health | <input type="checkbox"/> What is the most serious offence |
| <input type="checkbox"/> Mental health | <input type="checkbox"/> What parts of the facts need to be met head on? |
| <input type="checkbox"/> Capacity | <input type="checkbox"/> Impact on drivers license? |
| <input type="checkbox"/> Medications – evidence of? | <input type="checkbox"/> Convictions recorded? |
| <input type="checkbox"/> Substance abuse | |
| <input type="checkbox"/> When did the substance abuse commence? | |
| <input type="checkbox"/> What steps have been undertaken to address the substance abuse? | |
| <input type="checkbox"/> Clean drug analysts' certificates? | |
| <input type="checkbox"/> Counselling they have undertaken? | |