

# Affidavit



Basic Information (please use your full legal name and provide your maiden name if applicable:

Date: 03/30/2018

First: Suyog

Middle:

Last: Parajuli

Maiden:

Street Address: 4604 Deerwatch Drive

City: Chantilly

State: VA

Zip: 20151

Social Security Number: 224-97-6002

DOB (MM/DD/YYYY): 02/07/1988

Preferred Phone Number: 703-489-7302

Capital One Work Location: McLean

Please truthfully provide the information below as it relates to the offense(s) identified during the background screening process. If you have any questions, please contact Capital One and do not complete this form until you have a complete and full understanding of the information you are being asked to provide.

## Offense Details

Exact Offense? Possession of Alcohol By Person Under 21

Description of Actual Event: I was at a party with some friends while I was at my university. I had some drinks at the party and while walking home, I was booked by a police officer. I was underage at the time and therefore, it was an offense. I was by myself at the time. I appeared before court and because it was my first offense, the judge gave me the option to enroll in the Virginia Alcohol Safety Action Program. Once completed, the charges would be dismissed. I am not sure if this was a Pretrial Diversion Program but it seems like it was. For the program, I went to 4 classes on alcohol safety and completed it upon which the charges were dismissed. I do not believe there was a probation period for this.

Final Disposition/Outcome: Dismissed

Date of Offense: 12/01/2007

Date of Court Appearance:  
12/07/2007

Date of Final Disposition:  
12/05/2008

City: Charlottesville

County: Albemarle

State: Virginia

Was it a felony or misdemeanor? Felony ☐ Misdemeanor ☒

Were you convicted of the offense? NO ☒ YES ☐

Did you enter a Pretrial Diversion Program\*? NO ☐ YES ☒

Did you complete community service? NO ☒ YES ☐

Did you complete any classes or rehabilitation? NO ☐ YES ☒

Did you pay restitution? NO ☒ YES ☐

Did you pay any court costs or fines? NO ☐ YES ☒

Did you serve a probationary period? NO ☒ YES ☐

Were you sentenced to serve jail time? NO ☒ YES ☐

If YES, how many hours?:

If YES, explain: VASAP program as mentioned above

If YES, what was the amount?: \$

If YES, what was the amount?: \$71.00

If YES, how long?:

If YES, how long?:

\* A Pretrial Diversion Program is characterized by a suspension or eventual dismissal of charges or criminal prosecution upon agreement by the accused to treatment, rehabilitation, restitution, or other noncriminal or non-punitive alternatives.

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## Signature

*By signing this Affidavit form, I certify that all statements made by me on this form are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_

A handwritten signature in black ink, appearing to be "Hughes", written over a horizontal line.

Date: \_\_\_\_\_

03/30/18