

**IMPORTANT: Fill out this report completely and return to the Court Services Officer.**

**IDENTIFYING INFORMATION**

Name (First, Middle, Last): \_\_\_\_\_

Maiden, Married, or other names used: \_\_\_\_\_

Physical address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone number(s): \_\_\_\_\_ E-mail address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Place of Birth (city and state): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic ancestors: Y / N

Do you have any difficulties with reading and writing? Y / N

List names, ages, and relationship of the other people living in the household.

NAME

AGE

RELATIONSHIP

<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>

Driver's license number: \_\_\_\_\_ State issued: \_\_\_\_\_

Has your license ever been suspended/revoked? Y/ N If yes, why? \_\_\_\_\_

Have you ever served in the military? Y/ N If yes, what branch? \_\_\_\_\_

Enlistment date: \_\_\_\_\_ Discharge date: \_\_\_\_\_ Type of discharge: \_\_\_\_\_

Are you eligible for veterans' benefits? Y/ N Did you serve in a combat zone? Y / N

**FAMILY/MARITAL**

Full name of natural father: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ State of health: \_\_\_\_\_ Date of death: \_\_\_\_\_

Full name of natural mother: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ State of health: \_\_\_\_\_ Date of death: \_\_\_\_\_

Full name of step-father: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full name of step-mother: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Describe your relationship with your parents. (Example: how often do you call or visit? Are they supportive? Do you have frequent disagreements?): \_\_\_\_\_

Which parent are you closest to? \_\_\_\_\_ Which parent primarily raised you? \_\_\_\_\_

Please list all brothers and sisters. Beside each name place the appropriate number designation:

- 1 - full sister      2 - step-sister      3 - half-sister      4 - foster-sister  
 5 - full brother      6 - step-brother      7 - half-brother      8 - foster-brother

<u>Number</u>	<u>Full Name</u>	<u>Age</u>	<u>Address</u>	<u>Occupation</u>

What is your marital status? Single / Married / Divorced / Separated / Widowed

Current spouse's/partner's name: \_\_\_\_\_

Are you satisfied with your current relationship? Y / N If not, please explain: \_\_\_\_\_

List below any previous marriages or common-law relationships:

Spouse's name: \_\_\_\_\_ Number of children: \_\_\_\_\_  
 Date of marriage: \_\_\_\_\_ Date of divorce: \_\_\_\_\_

Spouse's name: \_\_\_\_\_ Number of children: \_\_\_\_\_  
 Date of marriage: \_\_\_\_\_ Date of divorce: \_\_\_\_\_

Has anyone in your family including your spouse or any close relative ever been in trouble with the law? Y / N

If yes, please explain: \_\_\_\_\_

Do you pay child support? Y / N If yes, please list the information below:

<u>Child's Name</u>	<u>Monthly Amount</u>	<u>Paid To Whom</u>

Have you ever been contacted by SRS/DCF or gone to Court due to non-support/alimony? Y / N

Are you behind in any payments? Y / N If yes, please list the amount of back child support owed: \_\_\_\_\_

06/29/15



**PRIOR RECORD**

Please report all **juvenile** arrests, diversions and convictions/adjudications:

<u>Date</u>	<u>Court Location</u>	<u>Charge</u>	<u>Adjudicated (Y/N)</u>	<u>Sentence</u>

Were you ever placed out of the home? \_\_\_\_\_ If yes, where and why? \_\_\_\_\_

Have you ever served any time in a juvenile facility? Y / N Where & how long? \_\_\_\_\_

Please report all **adult** arrests, diversions and convictions:

<u>Date</u>	<u>Court Location</u>	<u>Charge</u>	<u>Convicted (Y/N)</u>	<u>Sentence</u>

Age at first arrest? \_\_\_\_\_

Are you required to register as an offender in any state? Y / N If so, where: \_\_\_\_\_

Have you served any time in a prison? Y / N How long? \_\_\_\_\_ For what offense? \_\_\_\_\_

Have you served any time in a county jail? Y / N How long? \_\_\_\_\_ For what offense? \_\_\_\_\_

Are you **currently** on probation or parole? Y / N Where? \_\_\_\_\_ For what offense? \_\_\_\_\_

Probation/Parole Officer's name: \_\_\_\_\_

Have you been on probation or parole **in the past**? Y / N When? \_\_\_\_\_ Where?: \_\_\_\_\_

For what offense?: \_\_\_\_\_

Probation/Parole Officer's name: \_\_\_\_\_ How long were you on probation or parole? \_\_\_\_\_

Have you ever had your probation or parole revoked? Y / N If yes, why? \_\_\_\_\_

**EDUCATION**

Did you graduate from high school? Y / N If yes, when and where: \_\_\_\_\_

If not, what is the highest grade completed? \_\_\_\_\_ Why did you leave school? \_\_\_\_\_

Have you received your G.E.D.? Y / N If yes, when and where: \_\_\_\_\_

List all Senior High Schools you attended:

Grade \_\_\_ to \_\_\_ School: \_\_\_\_\_ Full address: \_\_\_\_\_

Grade \_\_\_ to \_\_\_ School: \_\_\_\_\_ Full address: \_\_\_\_\_

Grade \_\_\_ to \_\_\_ School: \_\_\_\_\_ Full address: \_\_\_\_\_

Did you have attendance problems in school? \_\_\_\_\_ Were you ever suspended or expelled from school? Y / N

Describe any special classes or programs you attended: \_\_\_\_\_

Describe your involvement in school sports and/or other school activities: \_\_\_\_\_

Did you go to college or trade school? Y / N

Dates attended      College/School      Major      Graduate (Y/N)

<u>Dates attended</u>	<u>College/School</u>	<u>Major</u>	<u>Graduate (Y/N)</u>

What plans, if any, do you have to further your education? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT**

Are you employed? Y / N If not, how long have you been unemployed? \_\_\_\_\_

Current employer: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Immediate Supervisor's name: \_\_\_\_\_

Date employed: \_\_\_\_\_ Current pay: \_\_\_\_\_ Work Schedule: \_\_\_\_\_

Does your employer know about this offense? Y/ N

What is the longest period of time you've been employed at the same location? \_\_\_\_\_

Have you ever been fired from a job? Y/ N If yes, why: \_\_\_\_\_

List your employment record for the past five (5) years. Please fill in as much information as possible:

Date      Employer      Address      Type of work      Reason left

<u>Date</u>	<u>Employer</u>	<u>Address</u>	<u>Type of work</u>	<u>Reason left</u>

**FINANCIAL**

Please list all income used to cover expenses in your household:

Your Income: \_\_\_\_\_ Spouse's Income: \_\_\_\_\_

Other Income: \_\_\_\_\_ Child Support received: \_\_\_\_\_

Do you receive any unemployment, worker's compensation, disability income, food stamps, etc? Y / N

If yes, please list: \_\_\_\_\_

Do you have any significant debt (auto loan/home loan/medical bills, etc.)? Y / N

If yes, please list: \_\_\_\_\_

Have your wages ever been garnished or have you ever been referred to a collection agency? Y / N

If yes, when and why? \_\_\_\_\_

Do you feel like your financial situation is manageable? Y / N If no, please explain: \_\_\_\_\_

**ACCOMODATIONS**

How would you describe the place in which you live? (Would you like to, or do you plan to move? Do you have friends or relatives over?) \_\_\_\_\_

How would you describe the neighborhood in which you live? (Do the police visit your neighborhood often? Are people dealing drugs, damaging or stealing property in your neighborhood?) \_\_\_\_\_

How many times have you moved in the last 12 months: \_\_\_\_\_ List the dates lived at each address below:

DATE

ADDRESS

<u>DATE</u>	<u>ADDRESS</u>

**LEISURE/RECREATION**

Have you belonged to any organizations, groups, or clubs in the past year? Y / N (Do you attend meetings, help with activities, or volunteer with their activities?) \_\_\_\_\_

How do you spend your free time? (Hobbies?) \_\_\_\_\_

Describe a typical day: \_\_\_\_\_

**COMPANIONS**

Please list three of your closest friends:

<u>Name</u>	<u>Age</u>	<u>Address &amp; Phone</u>	<u>Occupation</u>

Do you prefer to spend your free time primarily alone or with others? \_\_\_\_\_

What do you and your friends do for fun? \_\_\_\_\_

How many people do you know that have been in trouble with the law? (Example: Consider any misdemeanors, i.e. DUI, Theft, Obstruction, Disorderly Conduct and any felony convictions.) \_\_\_\_\_

How do you know these people? \_\_\_\_\_

How many people do you know that have never been in trouble with the law, and you would think they would never be in trouble? \_\_\_\_\_

How do you know these people? \_\_\_\_\_

**ALCOHOL/DRUG USE**

How often do you drink alcohol? \_\_\_\_\_ When was the last time you drank? \_\_\_\_\_

How much do you normally consume when drinking? \_\_\_\_\_

Do you think that you currently have an alcohol problem? Y / N

Have you ever had an alcohol problem in the past? Y / N If yes, explain? \_\_\_\_\_

How often do you use illegal drugs or abuse prescription drugs? \_\_\_\_\_

When was the last time you used illegal drugs or abused prescription drugs? \_\_\_\_\_

Do you think that you currently have a drug problem? Y / N What kind of drugs do you use? \_\_\_\_\_

Have you ever had a drug problem in the past? Y / N If yes, explain? \_\_\_\_\_

Has your use of alcohol or drugs contributed to any law violations? (Example: Crimes to support drug habit? Fights or Disorderly due to being intoxicated? Probation violations?) \_\_\_\_\_

Has your family or friends complained to you about your drinking or drug use? Y / N

Have you had problems in school or work because of your use of alcohol or drugs? \_\_\_\_\_

Have you had any medical problems because of your use of alcohol or drugs? \_\_\_\_\_

**EMOTIONAL**

Have you ever been diagnosed with any type of Mental Health disorder? (Example: Excessive Anxiety, Depression, PTSD, Bi-Polar, ADD/ADHD, etc? Y / N \_If yes, explain: \_\_\_\_\_

Have you ever received, or are you currently receiving any counseling for mental health issues? \_\_\_\_ If yes, explain: \_\_\_\_\_

List any medication you are presently taking for mental health reasons & why? \_\_\_\_\_

Do you have any concerns about your emotional stability: Y / N If yes, please explain: \_\_\_\_\_

**GOALS AND PROBATION PLANS:**

Do you think you should be placed on probation? Y / N If yes, why? \_\_\_\_\_

List the goals you have set for the future: \_\_\_\_\_

PLEASE CHECK THIS INFORMATION FORM TO BE SURE THAT ALL BLANKS ARE FILLED IN AND ALL INFORMATION IS CORRECT.

I have read/had read to me, this questionnaire, and it is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature