

MONROE CIRCUIT COURT PROBATION DEPARTMENT PRETRIAL SERVICES

INTAKE AND ORIENTATION FORM

You have been directed to report to the Monroe Circuit Court Probation Department for a Pretrial Assessment.

During your initial appointment with the Probation Department, you will be interviewed by a Pretrial Probation Officer. The information you provide will be included in a Pretrial Services Report that will be given to the Court and used, in part, by the Judge to determine whether you should be placed on pretrial supervision conditions in lieu of incarceration, in lieu of bail requirements, in addition to any current bail requirements, or released on your own recognizance.

You will not be asked about, nor should you discuss anything related to, the alleged offense in your pending criminal case(s).

You will be asked about past arrests, convictions, periods of incarceration, failures to appear for court proceedings, employment, residence, drug use, and anything else reasonably related to assure your appearance in these proceedings and/or the safety risk you may potentially pose to the community.

PROBATION DEPARTMENT HOURS

8:00 A.M. – 5:00 P.M. Monday – Thursday

8:00 A.M. – 4:00 P.M. Friday

RECORDING APPOINTMENTS FOR PROBATION OFFICER TRAINING/PRACTICE

Probation Officers (POs) are required to record some client appointments for training and quality assurance purposes. These recorded appointments will be viewed only by authorized probation department staff and other evaluators for the purposes of training, evaluating, and improving performance of probation staff. Clients are not required to be recorded and a client's decision to be recorded, or not, will not be used against them in any way during the course of probation/community supervision. The contents of the recording will remain confidential and considered work product and will not be released to the client, attorneys, or to the general public.

AUTOMATED CALLS/TEXT MESSAGES

Be advised that you may receive automated calls or text message from phone number (812) 558-9115 or (812) 349-2645 that have been generated by Monroe Circuit Court Probation Department to remind you of future events related to Court or probation obligations.

NOTE: You may be required to arrive at your court hearings early to watch a recording notifying you of your rights. If you are required to arrive earlier to watch a recording, you must attend at the time you were given in addition to the hearing time listed in this message."

CONFIDENTIALITY REQUIREMENTS

The confidentiality of client records maintained by the probation department is protected by federal and state laws as well as state rules and regulations.

PRETRIAL PROGRAM DEMOGRAPHICS FORM

Name: _____ (First) (Middle) (Last)

Maiden and/or Married Names: _____ Nicknames/Alias/Other Names Used: _____

Race: Caucasian / White Black / African American Multiracial Asian
 American Indian/Alaskan Native Native Hawaiian or Other Pacific Islander Other (specify) _____

Sex: Male Female
OPTIONAL: Gender: Male Female Biological male identifies as FEMALE Biological female identifies as MALE
 Agender Bigender Gender Fluid Transgender Preferred Pronouns: _____

Date of Birth: (MM/DD/YYYY) ____/____/____ Ethnicity: Hispanic / Latino Not Hispanic / Latino

Citizenship: US Citizen (Native or naturalized) Non US Citizen

Primary Language: English Spanish Sign Language Arabic Chinese Japanese
 Korean Other Language (specify) _____

Marital Status: Married Never Married Separated Single Divorced Widowed Living together not married

Religion: (optional) _____ Height: _____ Weight: _____

Hair Color: Bald Black Blonde Brown Gray Red White Other
Eye Color: Black Blue Brown Gray Green Hazel Other

Place of Birth: _____ Social Security Number: _____ - _____ - _____
(City / State)

Other States Resided In: _____ Drivers State & License # _____

CURRENT / LOCAL ADDRESS: _____ (Number/Street) (Apt/Lot) (City/State) (Zip Code)

Permanent Address: _____ (Number/Street) (Apt/Lot) (City/State) (Zip Code)

Contact Numbers: _____ Cell Text yes no _____ Home _____ Work Number & Extension

Email: _____

Emergency Contact: _____ (Name / Relationship to Client) _____ (Telephone Number)

SCHOOLS ATTENDED

Please list the name of the school(s) you most recently attended or are currently attending:

High School: _____ Start date: _____ End date: _____ Year graduated: _____
(Name of High School / City and State)

High School Status: Attending / Currently Enrolled Completed / Graduated Dropped Out Expelled

Last High School Grade Completed: 9th 10th 11th 12th
 High School Diploma TASC / GED When and where was it received? _____
Year / City / State

College / Trade School: _____ (Name of College / City and State)

College or Trade School Start date: _____ End date: _____ Year graduated: _____

College/Trade School Status: Attending/Enrolled Completed Graduated Dropped Out Pending Admission Withdrew
Start date: _____ End date: _____ Year graduated: _____ Degree(s): Certificate Associates Bachelor's Master's

EMPLOYMENT STATUS: Full time Part time Laid off Disabled Homemaker Unemployed
 Retired Student Self-Employed (explain): _____

Current Employer: _____ (Name / Business Name) _____ (Start Date) _____ (Average Hours per week)
_____ (Number / Street Address) (City) (State) (Zip) _____ (Hourly or Annual Income)

MILITARY HISTORY Yes No If YES, current or past? Current Past Branch of Service _____

Dates of service: _____ to _____ Type of discharge: _____ Do you receive VA benefits? Yes No
Pretrial Demographics Form 20200610