

ROCKLAND COUNTY PROBATION DEPARTMENT
QUESTIONNAIRE

The questions below are to help in providing the Court with information for sentence in your case. Please answer all questions carefully and truthfully.

NAME: _____
Last First MI

DOB: ____/____/____ **PLACE OF BIRTH:** _____

ADDRESS: _____

TEL. NO. (____) _____

HOW LONG AT PRESENT ADDRESS?: _____

LIVE WITH: _____
Name

RELATIONSHIP: _____

Most recent prior residences:

Number and Street Apt. No. City/State From: Mo/Yr to Mo/Yr

EMPLOYMENT:

SOCIAL SECURITY #: _____

Present Employer:

Name Address Since Type of Work Wages/Week

Does employer know about present case?

Other Most Recent Employment:

Name Address From To Type of Work Wages/Week

Reason For Leaving

EDUCATION: (Start with most recent)

School Address Highest Grade Completed When Completed?

MILITARY: Veteran ____ Non-Veteran ____ Registered With Selective Service ____

Branch _____ From: _____ To: _____ Selective Service #: _____

Type of Discharge: _____ Reason: _____

NAME: _____

PHYSICAL AND MENTAL HEALTH

Have you ever been the recipient of inpatient or outpatient counseling or therapy?

Yes___ No___

Therapist	Clinic & Address	Dates of Treatment
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Have you ever been the recipient of inpatient or outpatient alcohol/substance abuse treatment?

Yes___ No___

Therapist	Clinic & Address	Dates of Treatment
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Are you now or have you ever been seriously ill or injured?

Yes___ No___ If "Yes", please describe:

LEGAL HISTORY

Do you have any prior arrests or charges? Yes___No___If "Yes, # of arrests/charges___

Have you ever been in Family, Children's or Domestic Relations Court for any reason?

Yes___No___If "Yes",

When_____ Where_____

Have you ever been: In prison or reformatory _____, In a local jail _____,
In a juvenile facility _____,

On probation _____ On parole_____?

Do you have any charges pending now? Yes___ No___

If "Yes", name of Court_____ Charges_____

Please write anything you would like to say about yourself and/or your case:

Date:_____

Signature:_____

