

**Fourth Judicial District
Department of Correctional Services**

Informal Probation Intake Form

PLEASE COMPLETE THIS FORM PRIOR TO LEAVING COURT TODAY AND RETURN TO THE CLERK OF COURT.

Name: _____
(First) (Middle) Last

Present Address: _____
(Street) (City) (State) (Zip)

How long have you been at the above address? _____

E-Mail Address: _____ @ _____

Phones:
(include area code) () () ()
Landline – Home phone Cell Phone Message Phone Number

SOCIAL SECURITY #: _____ - _____ - _____ **DATE OF BIRTH (MM/DD/YY):** _____ / _____ / _____

Place of Birth: _____
(City) (State) (Country)

Physical Identifiers: _____
(Sex) (Race) (Weight) (Height)

(Hair Color) (Eye Color) Hispanic: Yes or No

Driver's License number: _____ **Issuing State:** _____

Emergency Contact Name and Phone Number: _____

Employment Information: Employer: _____
Date of Hire: _____

Employment Address: _____
(Street) (City) (State) (Zip)

Supervisor's Name: _____ **Work Phone:** _____

I hereby certify that I have received the 4th Judicial District's Informal Probation Program Information and will attend a group sign up within the next thirty (30) days.

SIGNATURE **DATE**

RETURN TO CLERK OF COURT DCS FAX: 712-325-0312

For information on Informal Probation go to www.fourthdcs.com