

ADULT INFORMATION SHEET (18 YEARS AND OLDER)

TODAYS DATE: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: home: \_\_\_\_\_ work: \_\_\_\_\_ other (explain): \_\_\_\_\_

SOCIAL SECURITY NO: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_

EYE COLOR: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

EMPLOYMENT (PLACE & ADDRESS): \_\_\_\_\_  
\_\_\_\_\_

HIGHEST GRADE COMPLETED: \_\_\_\_\_ IF 12 GRADES COMPLETED, WAS THIS HIGH SCHOOL GRADUATE OR G.E.D.? (CIRCLE ONE)

BLOOD ALCOHOL LEVEL: \_\_\_\_\_ DATE OF VIOLATION: \_\_\_\_\_ TIME OF VIOLATION \_\_\_\_\_

DRUG RELATED ARREST (CIRCLE ONE): YES NO TYPE OF DRUG: \_\_\_\_\_ DRUG LEVEL: \_\_\_\_\_

ARRESTING OFFICER (CHECK ONE): STATE POLICE \_\_\_\_\_ TOWN \_\_\_\_\_ OTN NUMBER: \_\_\_\_\_

MARITAL STATUS (CIRCLE ONE):

SINGLE	SEPARATED
MARRIED	DIVORCED
COMMON LAW	

CHILDREN (HOW MANY): \_\_\_\_\_

CHILDREN LIVING WITH YOU: \_\_\_\_\_  
CHILDREN LIVING WITH SOMEONE ELSE: \_\_\_\_\_

YOUR ATTORNEY FOR THIS CASE (PLEASE CIRCLE ONE):

COURT APPOINTED  
NO ATTORNEY  
PRIVATE : NAME \_\_\_\_\_  
PUBLIC DEFENDER

IF YOU OWN A CAR:

YEAR AND MAKE: \_\_\_\_\_ LICENSE PLATE #: \_\_\_\_\_

DRIVERS LICENSE #: \_\_\_\_\_

OFFENSES IN WHICH YOU WERE FOUND GUILTY BY JURY OR CHARGE YOU PLEAD GUILTY TO:  
\_\_\_\_\_  
\_\_\_\_\_