

Polk County Community Corrections Monthly Report

(Please answer all questions)

Date: _____

Name: _____

Supervising Officer: _____

Present Living Situation:

How many people live / stay at your residence? _____

List names and relationship to you:

Address: _____ City _____ State _____ Zip _____

Mailing (if different): _____ City _____ State _____ Zip _____

Home phone: _____ Cell: _____ Other: _____

Make / model of vehicle you drive: _____ Lic. plate# _____ Color: _____

My significant other's name is: _____

Employment / Education / Financial:

I'm looking for work. In the past month I have applied for _____ jobs. *N/A if employed or in school*

Employer / School: _____ Phone #: _____

Address: _____ Monthly income: _____

Work days: M T W Th F Sa Su Hours per week: _____

Treatment:

I was required to attend:

<input type="checkbox"/> Alcohol and drug treatment	<input type="checkbox"/> Anger management
<input type="checkbox"/> Domestic violence treatment	<input type="checkbox"/> Mental health counseling
<input type="checkbox"/> Sex offender treatment	<input type="checkbox"/> Parenting class
<input type="checkbox"/> Other: _____	

I am attending treatment: Yes No If yes, where? _____

I have completed treatment: Yes No If yes, where? _____

OVER



Community service:

I was required to perform community service work: _____ If yes, how many hours? _____

- I have performed all my community service hours
- I am working on my community service work, to this date, I have _____ hours remaining.

Conditions:

I paid court fees this month: Yes No Amount paid: _____ Remaining balance: _____

I am current on supervision fees: Yes No Date of last payment: _____

Have you had police contact since your last report? Yes No

If yes, please explain: _____

List any prescribed medications you are taking:

Is there anything you would like to discuss with your PO?

I acknowledge that the statements I have made on this form are true, correct and completed to the best of my knowledge.

Signature Date

Print Form