

PRE-DISPOSITION HOME DETENTION APPLICATION

APPLICATION MUST BE COMPLETED & SUBMITTED BY DEFENDANT'S ATTORNEY

DATE _____ CASE # _____ CHARGES _____

NAME _____ Alias _____
Print

DATE OF BIRTH _____ SOCIAL SECURITY # _____ AGE ____ RACE __ SEX __

ADDRESS _____ APT # _____ CITY/STATE _____ ZIP _____

RESIDENCE CANNOT BE SECTION 8 HOUSING OR PUBLIC HOUSING FOR SOME OFFENSES. HOUSING AUTHORITY APPROVAL REQUIRED

* Whose name is the phone listed under? _____

* Whose name is the residence listed under? _____

(THIS PERSON MUST GIVE VERBAL PERMISSION TO USE THEIR PHONE FOR HOME DETENTION TO ADULT COURT SERVICES BEFORE THE REPORT GOES TO THE JUDGE, AND MUST COME TO ACS AND SIGN A CONSENT FORM BEFORE STARTING HOME DETENTION.)

HOME PHONE _____ WORK PHONE _____ CELL _____

* Name of phone service provider: _____ (CenturyLink works best / NO Mediacom)

* NO SPECIAL FEATURES ALLOWED ON PHONE. Do you have special features on telephone service? _____
(Special features example: caller ID/ call waiting/ call forwarding/answering machine/ voice mail/ no modem etc.) You need a regular push button telephone NOT A CORDLESS. YOUR PHONE MUST BE IN WORKING ORDER BEFORE YOU START HOME DETENTION

PLACE OF EMPLOYMENT _____ Work # _____

Address _____ CITY / STATE _____

Supervisor _____ **** ATTACH CURRENT PAY STUB TO THIS APPLICATION ****
FEES ASSESSED FOR HOME DETENTION ARE BASED ON VERIFIED HOURLY PAY // First 2-Weeks Fees are due when HD is started

Hours of employment: Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____ Sunday _____ Hourly Rate/ Salary: \$ _____

*If self-employed you must provide a copy of your business license with copy of taxes from the prior year

* ARE YOU CURRENTLY ATTENDING SCHOOL? _____
NAME OF SCHOOL -- ATTACH CURRENT CLASS SCHEDULE

ATTORNEY _____ PROBATION/PAROLE OFFICER _____
Name and phone Name and phone

PROSECUTOR _____ Opposed / Not Opposed

* NEXT COURT DATE: _____ # DAYS TO SERVE _____ BEGINNING _____

Have you ever been on the Home Detention program before under Court Services? Y / N WHAT YEAR? _____

Successful / Revoked / Absconded _____

Were fees paid in full: Y / N

Court Services use only: