

**Adams County Department of Probation Services  
Community Reentry Program Pre-Commitment Application**

Applicant's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Physical Street Address, City, State, Zip \_\_\_\_\_

County of Residence \_\_\_\_\_ Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

**LEGAL INFORMATION**

Case Number: \_\_\_\_\_ Offense: \_\_\_\_\_

Sentence: \_\_\_\_\_ Report Date: \_\_\_\_\_

Do you have any open charges, warrants or detainers?  Yes  No

When: \_\_\_\_\_ Where: \_\_\_\_\_

Have you ever had an **Escape** conviction in this or any other state?  Yes  No

When: \_\_\_\_\_ Where: \_\_\_\_\_

Have you ever had a felony conviction in this or any other state?  Yes  No

When: \_\_\_\_\_ Where: \_\_\_\_\_

Charge: \_\_\_\_\_

Have you ever been incarcerated in a state and/or federal facility in this or any other state?  Yes  No

When: \_\_\_\_\_ Where: \_\_\_\_\_

Are you now or have you ever been a gang/group member or associated with a gang/group?  Yes  No

If yes, what is the name of the gang/group? \_\_\_\_\_

Do you have any enemies or anyone legally you are not permitted to be housed with?  Yes  No

If yes, WHO and briefly explain the nature of the problem? \_\_\_\_\_

**EMPLOYMENT INFORMATION** (Check the appropriate box(es))

Unemployed  Employed  Self Employed\*\*\*  Subcontractor\*\*

Company Name/Employer \_\_\_\_\_ Telephone Number \_\_\_\_\_

Supervisor \_\_\_\_\_ Physical Street Address, City, State, Zip Code \_\_\_\_\_