



52-3 District Court Probation Dept

 PROBATION DEPARTMENT
 (248) 853-5553 FAX: (248) 299-7891

 700 Barclay Circle
 Rochester Hills, MI 48307

 HONORABLE NANCY TOLWIN CARNIAK
 HONORABLE LISA L. ASADOORIAN
 HONORABLE LAURA E. POLIZZI
 DISTRICT JUDGES

 AMY L. LUCE
 COURT ADMINISTRATOR

- ☐ KARA ACORD, BA
- ☐ RYAN BERNIER, BA
- ☐ COURTNEY DECKER, BA
- ☐ JASEN KARAM, BS
- ☐ CAROLINE MITTON, BA
- ☐ DANIELLE MONNIER, MA, LPC, CAADC
- ☐ ASHLEY POWERS-SONNENBERG, MS
- ☐ HEATHER WHITED, BA, MPA
PROBATION OFFICER

E-mail: 523probation@oakgov.com

MONTHLY REPORT OF PROBATIONER

Case Number: _____ - _____

Today's date: Month _____ Day _____ Year _____

Full name: _____
FIRST MIDDLE LAST

Address: _____ Apt. _____ City _____ State _____ Zip _____

Is this a new address? Yes ☐ No ☐ Phone Number (_____) _____With whom do you live? Parents ☐ Wife ☐ Husband ☐ Friend ☐ Alone ☐ Relative ☐ Other _____
(If living with a Friend, Relative or Other, give name: _____)

Email address: _____

Type of vehicle owned: _____ Year _____ Make _____ Color _____ Plate # _____

Are you a student? Yes ☐ No ☐ School name: _____ City _____ State _____Do you work? Yes ☐ No ☐ Name of business _____ Phone #: _____

Address of business: _____ City _____ State _____ Zip _____

Hours working: Starting/Ending Time _____ Full-Time ☐ Part-Time ☐

Job classification, title or what kind of work you do: _____

Work days lost since last report: _____ Why? _____

How much do you earn? Hour \$ _____ Week \$ _____ Month \$ _____ Year \$ _____

Do you receive assistance? Yes ☐ No ☐ How much? ADC \$ _____ Soc. Sec. \$ _____

Unemployment \$ _____ Sub-Pay \$ _____ VA \$ _____ Other (List) _____

HAVE YOU HAD ANY POLICE CONTACT, BEEN ARRESTED OR TICKETED SINCE YOUR LAST REPORT? Yes ☐ No ☐

If yes, (1) What was the date or month of the police contact/arrest/ticket? _____

(2) What was the charge? _____ (3) What city? _____

(4) What police dept.? _____

(5) Write a **paragraph** of your version of what happened on this NEW POLICE CONTACT/ARREST/TICKET on the back of this form.Are you having any other problems you wish to discuss? Yes ☐ No ☐ If yes, _____Are you complying with all special conditions? Yes ☐ No ☐ If no, _____

COMMENTS:

I have provided all the information requested above. My answers to the questions are true and accurate to the best of my knowledge.

(SIGNATURE)

(DATE)