

KIRSTEN NIELSEN HARTIG
MAUREEN M. MCGINNIS
DISTRICT JUDGES

JENNIFER PHILLIPS
COURT ADMINISTRATOR

District Court for the County of Oakland



FIFTY SECOND DISTRICT-4TH DIVISION
PROBATION DEPARTMENT
520 W. BIG BEAVER RD
TROY, MI 48084
(248)528-1790 FAX (248)524-6454
<http://www.oakgov.com/courts>
email: 524probation@oakgov.com



PLEASE CHECK YOUR OFFICERS NAME

- ☐ PATTI BATES
☐ NICHOLE CRANDALL
☐ SARAH HARMON
☐ ERIKA SAYLOR
☐ SIDORELA ARAPI
☐ NICOLE HILTNER
☐ ERICA MICKEL
☐ _____

MONTHLY REPORT OF PROBATION

Today's date: Month _____ Day _____ Year _____

Full Name: _____

Address: _____ Apt _____

City _____ State _____ Zip _____

Is this a new address? Yes No Email address: _____

Home Phone Number (____) _____ Cell # (____) _____

With whom do you live? Spouse/Significant other Friend Alone Relative

If you are a student, name of school? _____

Do you attend full time or part-time? _____

Employed 40 hours or more per week 20 hours per week or less

Name of employer: _____ Phone Number: _____

Full time Part-time

Change in financial situation? Yes No

List all current prescribed medications: _____

If a change in medication, why? _____

**HAVE YOU HAD ANY CONTACT WITH LAW ENFORCEMENT SINCE
YOU LAST REPORTED? Yes No**

If yes, (1) Date of arrest/ticket/contact? _____

(2) Reason/Charge: _____ Where? _____

(3) Write a paragraph of your version of what happened on this NEW ARREST/TICKET on the back of this form.

Are you having any problems you wish to discuss? Yes No

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 _____

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