



Number of Minor Dependents:	
Names	Ages

**SECTION II  
EDUCATION**

Do you have a high school diploma or GED?  Yes  No

Educational and Vocational Training (include high school or highest grade completed if not high school graduate as well as education beyond high school):

**SECTION III  
INSURANCE**

**Insurance Information: (Attach copy of proof of motor vehicle insurance.)**

Name of Insurance Company:

Policy No.:	Expiration Date:
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**SECTION IV  
TREATMENT HISTORY**

Have you ever attended Alcohol or Drug treatment or counseling or received an assessment for possible drug or alcohol problems?  Yes  No

If **yes** state when, where and the reason for attendance or assessment:

**SECTION V  
EMPLOYMENT**

Military Service <input type="radio"/> Yes <input type="radio"/> No	Branch:
Type of Discharge:	Date of Discharge:
Present Employment <input type="checkbox"/> Check if unemployed	
Employer:	Phone No.
Address:	
Dates Employed _____ to _____	Occupation:
Salary:	
<b>Past Employment:</b> (List employment for the past six years. Begin with last employer. If you need more space use blank sheet of paper.)	
Employer:	Phone No.:
Address:	
Dates Employed _____ to _____	Occupation:
Reason Left:	
Employer:	Phone No.:
Address:	
Dates Employed _____ to _____	Occupation:
Reason Left:	

**SECTION VI  
INCOME**

Defendant's Employment:	\$ _____ Per Month	Public Assistance:	\$ _____ Per Month
Spouse's Employment:	\$ _____ Per Month	Other:	\$ _____ Per Month
Unemployment Compensation:	\$ _____ Per Month		

If **other** please specify source:

**SECTION VII  
OFFENSE RECORD**

**Prior Traffic Offense Record:** (List **all** Juvenile and Adult traffic incidents, DUI or DWI Arrests, Diversions, Deferred Prosecutions, Convictions and Expungements in Kansas or other states including those not resulting in formal charges or convictions. Include date of arrest, citation or incident, arresting or ticketing agency, charge and disposition.)

**Prior Criminal Offense Record:** (List **all** Juvenile and Adult incidents, Arrests, Citations, Prosecutions, Convictions, Expungements, Diversions or Deferred Prosecution Agreements in Kansas or other states including those not resulting in formal charges or convictions. Include date of incident involved, agency, charge, and disposition.)

**State the circumstances which led to the offense with which you are charged:**

**SECTION VIII  
ADDITIONAL INFORMATION**

**Please check the appropriate answer for each of the following questions**

Have you lived in your <b>current</b> residence for a year or more?	<input type="radio"/> Yes	<input type="radio"/> No
Have you worked at your <b>current</b> job for a year or more?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have a high school diploma or GED?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have outstanding court fines, restitution or child support?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have outstanding bills or debt?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have a valid driver's license?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have any pending court cases besides this case?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have support (monetary or emotional) from family members?	<input type="radio"/> Yes	<input type="radio"/> No
Have you suffered prior legal consequences due to alcohol or drug use?	<input type="radio"/> Yes	<input type="radio"/> No
Have you ever been diagnosed with a mental illness?	<input type="radio"/> Yes	<input type="radio"/> No
Do you feel that you have been charged fairly in this case?	<input type="radio"/> Yes	<input type="radio"/> No
Have you ever been convicted of a criminal offense (including juvenile)?	<input type="radio"/> Yes	<input type="radio"/> No

