PERSONAL DATA SHEET

Currently on Supervision: ☐ Yes ☐ No Previously on Supervision: ☐ Yes ☐ No Where: _____

Last Name First Name Middle Suffix (Sr, Jr, II, III)

Mailing Address (Apt #) City State Zip Code

Physical Address (if different) City State Zip Code

Home Phone Cell Phone E-Mail Address

References:

1. _____
Name Relationship

Address City State Zip Code Phone

2. _____
Name Relationship

Address City State Zip Code Phone

3. _____
(Name of nearest relative **not** residing with you) Relationship

Address City State Zip Code Phone

Employment:
☐ Full Time ☐ Part Time ☐ Seasonal ☐ Student, Retired, Homemaker, Disabled ☐ Unemployed

Employer Start and End Dates Employer Phone Number

Address City State Zip Code

Wages Position Supervisor's Name Is your employer (Y or N) aware of this supervision?

Personal Information:

Sex: ☐ Male ☐ Female	Date of Birth: _____ (Month) _____ (Day) _____ (Year)	HS Diploma or GED ☐ Yes ☐ No
Hair:	Race: ☐ African American ☐ Asian or Pacific Islander ☐ American Indian ☐ Caucasian ☐ Other: _____	Highest Grade Completed: (Including those with a GED)
Eyes:	Ethnicity: ☐ Hispanic ☐ Non- Hispanic	Marital Status: ☐ Single ☐ Separated ☐ Married ☐ Widowed ☐ Divorced
Height:	Citizenship: ☐ US ☐ Mexico ☐ Resident Alien ☐ Other: _____	# of Children under 18:
Weight:	Place of Birth: _____ (State) _____ (Country)	Language: ☐ English ☐ Spanish ☐ Other: _____

_____ _____ _____
Social Security Number DL # & State DL Expiration Date

Auto:

Make:	Model:	Body:	Color:
Year:	License Plate #:		State:

Scars/Marks/Tattoos:

Revised 4/07