CAUSE NO. _____

THE STATE OF TEXAS | IN THE COUNTY COURT

VS. | AT LAW OF

_____ | SMITH COUNTY, TEXAS

COMMUNITY SUPERVISION AND CORRECTIONS DEPARTMENT
PERSONAL DATA FORM

DEFENDANT'S ADDRESS _____ PHONE _____

CITY _____ STATE _____ COUNTY _____ ZIP CODE _____

MAILING ADDRESS (IF DIFFERENT) _____ CELL PHONE _____

RACE (CIRCLE ONE) W B ASIAN AMER. INDIAN SEX _____ ETHNICITY (CIRCLE ONE) HISPANIC / NON HISPANIC

HT _____ WT _____ EYES _____ HAIR _____ BIRTH DATE _____ CITIZENSHIP U.S. OR _____

SCARS, MARKS, TATTOOS _____ BIRTHPLACE (CITY/STATE) _____

EMPLOYER _____ ADDRESS _____

PHONE _____ STATUS (CIRCLE ONE) FULL-TIME / PART-TIME TYPE WORK _____

UNEMPLOYED (CIRCLE ONE) SEASONAL RETIRED DISABLED STUDENT HOMEMAKER

WORK HOURS/DAYS _____ MONTHLY EARNINGS (AFTER DEDUCTIONS) _____

AUTO: YEAR/MAKE _____ BODY TYPE _____ MODEL _____ COLOR _____

DRIVER'S LICENSE: TEXAS OPER. COMM. OPER. CHAUFFEUR (CIRCLE ONE) EXPIRES ON _____

DL NUMBER _____ SOCIAL SECURITY NUMBER _____

LAST GRADE COMPLETED _____ DEGREE _____ CURRENTLY A STUDENT AT _____

MARITAL STATUS (CIRCLE) S M W D SEP SPOUSE _____ NUMBER OF CHILDREN _____

THREE PEOPLE WHO WILL KNOW YOUR WHEREABOUTS (THAT DO NOT LIVE AT THE SAME ADDRESS OR YOUR ADDRESS):

(1) NAME _____ ADDRESS _____

PHONE _____ RELATIONSHIP TO DEFENDANT _____

(2) NAME _____ ADDRESS _____

PHONE _____ RELATIONSHIP TO DEFENDANT _____

(3) NAME _____ ADDRESS _____

PHONE _____ RELATIONSHIP TO DEFENDANT _____

DATE _____, 20_____

_____
DEFENDANT SIGNATURE

ASSISTED IN PREPARATION BY: _____ TITLE: _____