



ELKHART COUNTY COMMUNITY CORRECTIONS

201 N. COTTAGE AVE., GOSHEN, IN 46528

(574) 534-2210

(574) 533-1251 (FAX)

PROGRAM ELIGIBILITY REFERRAL FORM

(To be filled out by referral source)

Referral Source:

Date of Referral:

Address:

Phone:

Fax:

Defendant's Name:

Cause Number:

Defendant's present address or location:

Defendant's Date of Birth:

Offense and Class:

Sentencing Date:

***** A copy of the following information must be emailed, faxed or mailed prior to interview:**

1. Plea Agreement (if available)
2. Pre-Sentence Investigation report (if available)
3. Probable Cause/Charging Information (Original/Current)
4. Affidavit or Official Version (police report)
5. Petition to Revoke Probation

Has the defendant previously been in an Elkhart County Community Corrections program?

If yes, when and what program?

Comments:

Please contact Stacey Deter at stdeter@elkhartcounty.com for any questions.

*****WE WILL EXPECT THE DEFENDANT, IF NOT INCARCERATED, TO CONTACT OUR DEPARTMENT TO SCHEDULE AN ASSESSMENT. See application for instructions.*****



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APPLICATION FOR ELKHART COUNTY COMMUNITY CORRECTIONS

(To be filled out by defendant or transfer)

Applications must be submitted to Elkhart County Community Corrections at 201 N. Cottage Ave within 48hrs of receiving the application.

All applicants must schedule an interview with Community Corrections following the submission of this application, unless notified differently.

- a. Interviews will be held by appointment only.
- b. No interviews will be held on Holidays.
- c. It is your responsibility to schedule the interview.
- d. **To schedule an interview please call Stephanie Larson at (574) 534-2210 or email at SLarson@elkhartcounty.com**

If you are late to the interview, you will not be granted an interview that day.

If you fail to show up for the scheduled interview, your sentencing court will be notified.

*You must fill out the entire application to the best of your knowledge *

Name

Date

Court Information

- 1. Judge
- 2. Prosecuting Attorney
- 3. Defense Attorney
- 4. Cause Number
- 5. Offense (Not a probation violation)
- 6. Are you here because of a probation violation?
 - a. If yes, what was the offense you were on probation for? _____

7. Next Court Date Report Date

8. Plea/Sentence (time to serve)

9. Are you currently on probation or parole? Yes No Will you be? Yes No

10. Victim (if any)

11. Are you within the United States legally?

12. Are you a veteran? Yes No Honorable Discharge? Yes No

13. Print any co-defendants you have for the above cases:

14. Print any enemies you have:

15. Other Pending Cases (Offense / Cause Number or County)

- a.
- b.

Accommodations

16. Current Address

17. Cell Phone #

18. Have you ever been convicted or charged with battering or sexually abusing anyone that you would be living with? (Battery, Domestic Battery, Invasion of Privacy, Child Molesting, Sexual Misconduct with a Minor, etc.)? Yes No

If yes, explain:

19. Do you have a valid driver's license Yes No

a. If no, why not?

20. Date of Birth Race Gender

21. Social Security Number

22. Do you pay or owe child support (How much?)

23. Do you pay or owe restitution (How much?)

Criminal History

24. Prior Convictions (Offense / Year Committed)

a.

b.

c.

d.

25. Violent or Sexual History (Offense / Year Committed)

a.

b.

c.

26. Are you required by law to register as a Sex Offender Yes No

a. If yes, how often?

27. Are you required by law to register as a Violent Offender Yes No
a. If yes, how often?

28. Protective Order(s) (If yes then with whom?)

a.

b.

29. Have you ever Escaped, Failed to Return to Lawful Detention, or Failed to Appear?

30. Prior Alternative Incarceration

a. Community Corrections (Offense / Year Completed / Successful Completion?)

i.

ii.

31. Discipline Problems for Current Offense (Charge / Institution / Sanction)

a.

b.

Employment (If you change locations at work your employment is subject for approval)

32. Employer

a. Address of where you work?

b. How long does it take you to get there?

c. Do you leave the jobsite for work purposes?

i. More than 5 locations in a day?

ii. Do you enter private residences?

d. Shift

e. Pay Rate _____

f. Employer Notified about your current offense Yes No

g. Is a supervisor with you or at the worksite while you are working? Yes No

i. Is your supervisor a family member?

If unemployed, how will you pay Community Corrections Fees? *Do not write that you will find a job or N/A.*

Treatment

33. Current (Substance Abuse or Mental Health / Agency)

34. Previous (Substance Abuse or Mental Health / Agency / Year Attended)