

Prosecutorial Pre-Trial Diversion Assessment Tool

SELF-REPORT SURVEY – COMMUNITY SUPERVISION ASSESSMENT TOOL

Name: _____

Today's Date: _____

The following questions ask about several things in your life, such as education, employment, your family, friends, and your beliefs. Please answer the following questions the best you can. There are no right or wrong answers to these questions. Some questions will be simple yes/no questions, and others will ask you to circle a number which corresponds to how much that statement reflects your beliefs or is "true" for you.

1. Highest Education

- ___ Less than 12th Grade
- ___ High School Graduate
- ___ GED
- ___ College

2. In school were you ever suspended or expelled? Yes ___ No ___

3. How long have you lived at your current address? _____

4. How many address changes have you had in the past 12 months (do not count incarceration)? _____

5. What is the age that you first began regularly using alcohol? _____

6. What is the longest period of time you have abstained from drinking? _____

7. If you have never drank, check box:

8. What percent of your close friends have been in trouble with the law? _____ %

9. Would you say that you live in a "high crime" neighborhood? Yes ___ No ___

10. Were you employed at the time of your arrest? Yes ___ No ___

11. If yes, how many hours per week did you work? _____

12. Are you currently employed?

- ___ Full-time
- ___ Part-time
- ___ No, I am on disability
- ___ No, I am retired
- ___ No, not currently employed

13. In your opinion, do you have a lot of free time? Yes ___ No ___

14. On average, approximately what percent of your week is considered free time? _____ %

