

Early Termination of Probation Datasheet and Checklist

FULL NAME USED WHEN SENTENCED: *First:* _____ *Middle:* _____
Last: _____

DATE OF BIRTH USED WHEN SENTENCED: *Month:* _____ *Day:* _____ *Year:* _____

WHAT IS YOUR MAILING ADDRESS/PHONE NUMBERS/ EMAIL ADDRESS? *Address:* _____

Phone No.: (____) ____ - _____ *cell* / (____) ____ - _____ *other*
Email Address: _____

WHAT IS YOUR COURT CASE NUMBER? *Case No.:* _____

WHAT WERE YOU FOUND GUILTY OF? *Charge(s):* _____

WHEN WERE YOU SENTENCED? *Month:* _____ *Day:* _____ *Year:* _____

IN WHAT COUNTY DID THIS OCCUR? *Name of Florida county:* _____

WHAT IS THE TERM OF YOUR PROBATION (HOW LONG)? *Years:* _____ *Months:* _____

Probation Information

NAME OF PROBATION OFFICER(S)
IF YOU'VE HAD MORE THAN ONE IN THE LAST 6 MONTHS LIST ALL NAMES:
Current P.O. Name: _____
Most Recent P.O.: _____
Next P.O.: _____

P.O.'S TELEPHONE NUMBER: (____) ____ - _____ *work* / (____) ____ - _____ *other*

PROBATION OFFICE ADDRESS: *Street:* _____
City: _____ *State:* _____ *Zipcode:* _____

WHAT SPECIAL CONDITIONS WERE YOU REQUIRED TO COMPLETE? *List all:* _____

Checklist: Answer all questions truthfully.

HAVE YOU COMPLETED ALL SPECIAL CONDITIONS OF PROBATION? *YES [] / NO [] / If you do not know, ask your PO.*

