

MISDEMEANOR COMPLIANCE
1630 N. BOSTON AVE, PORTALES, NM 88130
575-365-8569 X 118

MONTHLY REPORT/ CHECK-IN FORM DWI Related Non-DWI Related Time: _____

Name: _____ Date of Check-in: _____

Phone Number: _____ Email: _____

Home Address (where you live): _____

Do you get mail there? Circle: Yes or No, if no, mailing address: _____

Section 1:

Are you currently employed? Yes No, if no, why? _____

Employers Number: _____ How much per hour? \$ _____

How many hours per week do you work? _____

Normal days off, please circle: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

How often are you paid? Daily Weekly Every 2 weeks Monthly Other: _____

Section 2:

Are you on probation anywhere else besides Roosevelt County? Yes No (if no, skip to next section)

If yes, where: _____ Probation Officer: _____

What crime(s)? _____

How long is your probation? _____ Time left: _____

Section 3:

Have you been stopped by the police in the last month? No Yes, for: _____

Have you been arrested in the last month? No Yes, for what?: _____

By who? Portales Police Dept. Roosevelt County Sheriff's Office State Police

Other: _____

When: _____ Charges: _____

Section 4:

Do you drive a vehicle? No. How do you get around? _____

Yes, year/make/model/, color & plate #: _____

Are you the owner? Circle one: Yes No, owner: _____

Section 5:

Are you paying today? Yes No If no, why and when?: _____

GO TO BACK TO FILL OUT MORE

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DWI RELATED

Class	Attending/Completed?	If no, why?
DWI School		
Victim Impact Panel		
Celebrate		
Community Service		
Counseling: Who:		
Other: Name:		
Do you have Ignition Interlock Installed? With who: _____		

Do you have any questions, comments, or concerns you would like to talk about?

Non-DWI Related

Things to Complete	Attending/ Completed?	If no, why?
Batters Intervention Class		
Community Service		
Counseling		
Anger Management		
Restitution		
Life Skills/ Matt 25		

Do you have any questions, comments, or concerns you would like to talk about?

Probationer's Signature: _____

Probation Officer's Signature: _____