



A NETWORK OF LIFE TRANSFORMATION CENTERS FOR MEN & WOMEN RE-ENTERING SOCIETY AFTER PRISON

I. PERSONAL HISTORY

- a. Full name
b. Date of birth Sex M / F Ethnicity
c. AIS# or Federal# (circle one) Register / DCDC / FBI / INS
d. Do you have a driver's license? Yes / No If yes, what state? If no, explain:
e. Rehabilitation centers attended other than prison
f. Do you have any physical or mental problems? Yes / No
i. Are you handicapped in any way? Yes / No
ii. If you answered, "Yes," for d. or d.i., please explain
iii. Are you physically, emotionally & mentally able to work? Yes / No
g. Do you use alcoholic beverages? Yes / No / Occasionally
i. Do you consider yourself an alcoholic? Yes / No
ii. Have you ever attended an AA or NA meeting? Yes / No
iii. Have you ever been fired or quit a job because of alcohol? Yes / No
h. Have you ever used any type of drugs? Yes / No Type
i. Do you now use any type of drug(s)? Yes / No Type
i. Have you ever participated in a prison treatment program? Yes / No Please explain
ii. Have you ever been committed to a psychiatric hospital? Yes / No Please explain

II. PRISON HISTORY

- a. Present or last prison name
Street address
City State Zip
b. Your release will be for: (Circle one) Parole / Probation / CommCort / EOS
c. Date I made parole or will be paroled EOS date
d. How many times have you been incarcerated? How many years served total?
Where? When?
Where? When?
Where? When?
Where? When?
e. List all charges & convictions received:
i. Offense Date
Place
ii. Offense Date
Place
iii. Offense Date
Place
iv. Offense Date
Place

CONTINUE ON BACK OF PAGE TO LIST ALL PLACES/DATES INCARCERATED & ALL CHARGES/CONVICTIONS RECEIVED.

III. EMPLOYMENT HISTORY

- a. What was your last job before incarceration? \_\_\_\_\_
- b. What job training did you have before incarceration? \_\_\_\_\_  
\_\_\_\_\_
- c. What jobs have you worked on in prison?
  - i. Institution \_\_\_\_\_ Job \_\_\_\_\_  
How long \_\_\_\_\_
  - ii. Institution \_\_\_\_\_ Job \_\_\_\_\_  
How long \_\_\_\_\_
- d. List all courses taken while incarcerated:
  - i. Course \_\_\_\_\_ Institution \_\_\_\_\_
  - ii. Course \_\_\_\_\_ Institution \_\_\_\_\_
- e. List all skills you have \_\_\_\_\_  
\_\_\_\_\_

**CONTINUE ON BACK OF PAGE TO LIST ALL PRISON JOBS WORKED, COURSES  
TAKEN WHILE INCARCERATED & SKILLS.**

IV. FAMILY HISTORY

- a. Parents names & address \_\_\_\_\_  
\_\_\_\_\_
- b. Last contact date with parents \_\_\_\_\_
- c. Circle one: Married / Single / Separated / Divorced
- d. Spouse's name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_
- e. Last contact date with spouse \_\_\_\_\_
- f. How long have you been married? \_\_\_\_\_
- g. Previously, how many times have you been married? \_\_\_\_\_
- h. Number of children \_\_\_\_\_ Name(s) \_\_\_\_\_

V. EDUCATIONAL HISTORY

- a. Last grade completed \_\_\_\_\_ Would you be willing to get your GED? Yes / No
- b. If in college, what was your degree? \_\_\_\_\_
- c. List any trade school experience \_\_\_\_\_
- d. List any other specialized experience \_\_\_\_\_

VI. RELIGIOUS HISTORY

- a. Are you a church member? Yes / No Where \_\_\_\_\_
- b. Attend prison chapel service? Y / N Chaplain's name \_\_\_\_\_
- c. Are you a Christian? Y / N / Not sure  
When did you become a Christian? \_\_\_\_\_  
Describe your conversion experience & your relationship with the Lord \_\_\_\_\_  
\_\_\_\_\_

**Return your information, ALONG WITH A REFERENCE LETTER FROM YOUR CHAPLAIN  
&/OR CASE MANAGER, no earlier than THREE MONTHS BEFORE YOUR PAROLE  
CONSIDERATION DATE.**