Template Intake Form

Purpose: This document is a template intake form to be used when the pretrial professional first meets the person assigned to pretrial services. It is designed to help the pretrial professional get to know the person and understand their strengths, needs, and potential obstacles to pretrial success.

*Note: Your local jurisdiction may require additional questions. This form is available as a Word document so that you can tailor it to meet your jurisdiction’s requirements.*

*Make sure each person ordered to pretrial services has a copy of their specific release conditions as ordered by the court.*

This form is intended to help us better understand how we can help you be successful while on pretrial supervision.

1. What is your name?
2. What is your race?
3. What is your gender?
4. What is your gender identify?

Male, Female, Transgender, Nonbinary, Other:

1. What pronouns do you use?

*Note: If the person identifies as transgender or nonbinary, and your agency has a practice of having a gender-specific case manager, ask whether the person would prefer to be assigned to pretrial staff of a particular gender.*

1. Are you pregnant? Yes or No
2. Are you the primary caretaker of a child or children? Yes or No
3. Are you the primary caretaker of an elderly or disabled parent or grandparent? Yes or No
4. Do you anticipate needing childcare or other caretaker assistance to attend appointments or court hearings? Yes or No
5. What is your occupational/job status?
	* Full-time
	* Part-time
	* Self-employed
	* Unemployed
	* Student
	* Returning to work

Explanation:

*Note: Attending court hearings and appointments is one of many existing responsibilities for people on pretrial release. Determining the best method, time, and contact over the next few months will help both of you be successful in your communication. The following questions are intended to help you with scheduling and allow people to make informed decisions.*

1. Do you have access to a reliable, working phone? Yes or No
2. Is it okay to leave a message at this number? Yes or No
3. Would you be interested in using an app to communicate (e.g. Reconnect)?
4. Who is in your support system (spouse, friend, family)?

a. If we are unable to reach you, can we contact them?

1. What is the best day and time to contact you? Check all that apply.

|  |  |  |  |
| --- | --- | --- | --- |
|  | A.M. | Midday | P.M. |
| Monday |  |  |  |
| Tuesday |  |  |  |
| Wednesday |  |  |  |
| Thursday |  |  |  |
| Friday |  |  |  |
| Saturday |  |  |  |
| Sunday |  |  |  |

1. Do you have reliable transportation to court and other appointments? Yes or No
2. The chart below is intended to determine your interest in community resources.

|  |  |  |
| --- | --- | --- |
|  | Would you like a referral to community resources? | Are you already seeking or receiving services? |
| Housing instability | Yes or No | Yes or No |
| Mental health | Yes or No | Yes or No |
| Trauma | Yes or No | Yes or No |
| Medications | Yes or No | Yes or No |
| Domestic or family violence | Yes or No | Yes or No |
| Substance use | Yes or No | Yes or No |
| Employment | Yes or No | Yes or No |

Explanation:

Our goal is to help you return to court, attend meetings, and remain arrest-free during the pretrial period. I’m going to ask you a few questions about how you spend your day and other things about your life. Your answers will help me identify potential barriers and resources, which will in turn help me see if there are ways I can better support you during this difficult period.

1. Over the next few months, do you have any specific goals (either related or unrelated to the pending case)?
2. Would you like to be paired with a peer support navigator?

Yes or No

1. Can you briefly describe your typical weekday? (Example: taking your child to a park…)
2. What helps you destress? What brings you joy?
3. Do you have any other concerns that you would like to mention?

Unless otherwise stated, your responses to any questions are confidential. At times, it may be helpful to share your responses with the prosecutor’s office, defense attorney, judge, or service providers to avoid repetition of questions, align services, and provide additional context. If information will be shared, we will review a release of information with you so that you are assured the right of giving informed consent. Is there anything we talked about that you don’t want me to share?