

CAUSE NO. \_\_\_\_\_

THE STATE OF TEXAS  
VS.  
\_\_\_\_\_

IN THE COUNTY COURT  
AT LAW OF  
SMITH COUNTY, TEXAS

**COMMUNITY SUPERVISION AND CORRECTIONS DEPARTMENT  
PERSONAL DATA FORM**

DEFENDANT'S ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ COUNTY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT) \_\_\_\_\_

RACE (CIRCLE ONE) W B ASIAN AMER. INDIAN SEX \_\_\_\_\_ ETHNICITY (CIRCLE ONE) HISPANIC / NON HISPANIC

HT \_\_\_\_\_ WT \_\_\_\_\_ EYES \_\_\_\_\_ HAIR \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ CITIZENSHIP U.S. OR \_\_\_\_\_

SCARS, MARKS, TATTOOS \_\_\_\_\_ BIRTHPLACE (CITY/STATE) \_\_\_\_\_

EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ STATUS (CIRCLE ONE) FULL-TIME / PART-TIME TYPE WORK \_\_\_\_\_

UNEMPLOYED (CIRCLE ONE) SEASONAL RETIRED DISABLED STUDENT HOMEMAKER

WORK HOURS/DAYS \_\_\_\_\_ MONTHLY EARNINGS (AFTER DEDUCTIONS) \_\_\_\_\_

AUTO: YEAR/MAKE \_\_\_\_\_ BODY TYPE \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_

DRIVER'S LICENSE: TEXAS OPER. COMM. OPER. CHAUFFEUR (CIRCLE ONE) EXPIRES ON \_\_\_\_\_

DL NUMBER \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

LAST GRADE COMPLETED \_\_\_\_\_ DEGREE \_\_\_\_\_ CURRENTLY A STUDENT AT \_\_\_\_\_

MARITAL STATUS (CIRCLE) S M W D SEP SPOUSE \_\_\_\_\_ NUMBER OF CHILDREN \_\_\_\_\_

THREE PEOPLE WHO WILL KNOW YOUR WHEREABOUTS ( THAT DO NOT LIVE AT THE SAME ADDRESS OR YOUR ADDRESS):

(1) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ RELATIONSHIP TO DEFENDANT \_\_\_\_\_

(2) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ RELATIONSHIP TO DEFENDANT \_\_\_\_\_

(3) NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ RELATIONSHIP TO DEFENDANT \_\_\_\_\_

DATE \_\_\_\_\_, 20 \_\_\_\_\_

DEFENDANT SIGNATURE

ASSISTED IN PREPARATION BY: \_\_\_\_\_ TITLE: \_\_\_\_\_