



COMMUNITY TIES QUESTIONNAIRE



Loved One's Name: _____ **Line Number:** _____

- Your Name: _____
- Current Address: _____
- Telephone Number: _____
- E-mail: _____
- How do you know this member of our community, and for how long? _____

- Who else is here at court in support of the person facing charges, and how are they related to him/ her?

- Why do you believe this member of our community will return to Court if released from jail?

- What can you and/or others do to support this person make it to Court and fulfill their release conditions?

- Why is this person needed at home or in the community? (job, responsibilities, etc)

- Does your loved one have any failures to appear (FTA's)? Do you know why?

- What else would you like the Court to know about this member of our community?

