



**ALASKA DEPARTMENT OF CORRECTIONS
HOUSE ARREST PROGRAM
ELECTRONIC MONITORING
Office appointment questionnaire**

NAME: _____
 OBSCIS #: _____
 CURRENT ADDRESS: _____
 PHONE #: _____

SINCE YOUR LAST APPOINTMENT TO THE HAP OFFICE, HAVE YOU:

PLEASE PRINT

- | | | | |
|----|---|-----|----|
| 1. | Changed your address or telephone number? | YES | NO |
| 2. | Changed your job or employment status? | YES | NO |
| 3. | Had any contact with any law enforcement agency? | YES | NO |
| 4. | Had any emergencies that took you out of range without approval? | YES | NO |
| 5. | Had any equipment malfunctions? | | |
| 6. | Made scheduled payments on your fines, restitution, and/or child support? | YES | NO |
| 7. | Made scheduled payment to the EM/House Arrest Program? | YES | NO |

Please explain all "YES" responses to questions 1 through 5: _____

Please list any questions, problems, etc., that you would like to discuss with HAP officers: _____

 Signature

 Date