

**For each question, please provide an answer or write “n/a” if the question does not apply to your situation.**

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Current Charge(s): \_\_\_\_\_

\_\_\_\_\_

Date of Offense/Incident: \_\_\_\_\_

**Law Enforcement Agency:** UCF PD Orange County Sheriff Orlando Police Dept. Seminole County Sheriff's Office Florida Highway Patrol ATF

Other \_\_\_\_\_

County of Offense/Incident: \_\_\_\_\_

Location of Offense/Incident: \_\_\_\_\_

Number of Law Enforcement Officers Present: \_\_\_\_\_

Were there any Witnesses present? (Other than Law Enforcement Officers)

YES NO

If so, please list their names and phone numbers (If known):

**For each question, please provide an answer or write “n/a” if the question does not apply to your situation.**

Was anyone else arrested or given a citation in addition to you?

YES

NO

If yes, please provide their name(s):

Are They a UCF Student?

YES

NO

Had you consumed any alcohol or drugs on the date you were arrested/cited?  YES  NO

If yes, what alcohol or drugs had you consumed?

_____	When? _____
_____	When? _____
_____	When? _____
_____	When? _____
_____	When? _____

Please describe the circumstances that led to the arrest/citation:

**For each question, please provide an answer or write “n/a” if the question does not apply to your situation.**

Have you ever been arrested or charged with a crime before (including as a juvenile)? YES NO

If yes, what was the charge and the final result?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Are you currently on probation for any offense?

YES NO

Explain: