



New Jersey Judiciary
**DCP&P Request for Adult Probation
 or Pretrial Services Records**
Confidential

Request Date
Request Needed By
Preferred Delivery <input type="checkbox"/> Pick Up <input type="checkbox"/> US Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Courier / Messenger <input type="checkbox"/> On Site Inspection

Part A: Division Requester Identification

Last Name	Middle Initial	First Name
Job Title	Supervisor	Daytime Telephone (Include area code) ext.
Division Office Address		Fax (Include area code)
City	State	Zip Code
Email (optional)		

Part B: Division Case Identification

Case Name	NJ Spirit Number
Court docket number(s)	Date of next court proceeding
Judge's Name	

Part C: Type of Record(s) Requested

Party whose records are sought is a (select one): <input type="checkbox"/> Division Defendant / <input type="checkbox"/> Potential Resource Parent / <input type="checkbox"/> Other Adult in Resource Home Defendant's Name:	Party's Birth Date:	Last 4 digits of Party's Social Security Number	SBI Number:
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The Judiciary will ordinarily disclose to Division upon request the most recent version of the following records or information regarding a probationer who is a party to a Division proceeding or a resident in a household where a child may be placed.

Please check all that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> Employment records | <input type="checkbox"/> Treatment service history (but not the actual provider records) | <input type="checkbox"/> VOM Report |
| <input type="checkbox"/> Adult school records | <input type="checkbox"/> Office and/or Phone Visits Dates | <input type="checkbox"/> Home address |
| <input type="checkbox"/> Drug test results | <input type="checkbox"/> Statements of VOP charges | <input type="checkbox"/> Work address |
| <input type="checkbox"/> Payment records | <input type="checkbox"/> Judgment of Conviction | <input type="checkbox"/> Conditions of Supervision |
| | <input type="checkbox"/> Probationer's case plan | <input type="checkbox"/> Compliance Certifications |

Other: If the Division is requesting records other than those listed above, please describe the records being requested, and explain why the Division needs these records.

See attached for additional description and explanation.

I certify that I am requesting the Adult Probation / Pretrial Service/Pretrial Monitoring records in question solely for official Division purposes related to the above-referenced case.

I further certify that the Division will keep all records confidential pursuant to *R. 1:38-3(d)(12)*, *R. 5:13-8* and *N.J.S.A. 9:6-8.10a.* and any other applicable statutes or court rules, and shall take all reasonable steps to safeguard the confidentiality of the same, including, but not limited to, seeking an appropriate protective order from the court when necessary.

Signature: _____

For Judiciary Use Only

Disposition <input type="checkbox"/> Delivered <input type="checkbox"/> Denied <input type="checkbox"/> Unavailable	Disposition Date
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If request is denied or records are unavailable, explain here: