



SAC or SFAC: Legal History Form

(Complete if not included in the Psychological Report)

Bureau of Intensive Treatment Services (BITS)

Name:	DOB:	Age:	Gender:	TABS ID:	Referral Date:
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Sources of Legal History Information:

- Date of E-justice Rap Sheet: _____
- Date of Pre-Sentence Investigation Report (from Probation): _____
- Other sources: _____

Date of Event/Alleged Event	Date of Arrest	Age at Arrest	Charges	Description (e.g., location, weapons, substance use, accomplices)	(Alleged) Victim Information (e.g., gender, age relationship)	Outcome (Dismissed, Sentence)