

# Hancock County Community Corrections

## Home Detention Pre-Screen Request



Please submit completed request to: [HCCC-enotifications@hancockin.gov](mailto:HCCC-enotifications@hancockin.gov)

Requestor: \_\_\_\_\_ Request Date: \_\_\_\_\_

CLIENT NAME: \_\_\_\_\_

CLIENT DATE OF BIRTH: \_\_\_\_\_

CAUSE NUMBER: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

COUNTY OF RESIDENCE: \_\_\_\_\_

EMPLOYMENT: \_\_\_\_\_

NEXT HEARING DATE: \_\_\_\_\_

**\*\*PLEASE SUBMIT REQUESTS A MINIMUM OF ONE WEEK PRIOR TO HEARING DATE TO ALLOW SUFFICIENT TIME TO COMPLETE PRE-SCREENING.**