

EAU CLAIRE COUNTY COMPAS REFERRAL

REFERRING PERSON/AGENCY:

Contact Name:

Agency:

Street Address:

Phone Number: () -

e-mail address:

Date: / /

Joint Referral

Independent Referral

If this is a Joint Referral list all persons that should receive the COMPAS results:

AGENCY	NAME	STREET ADDRESS	E-MAIL ADDRESS
<input type="checkbox"/> D.A.			
<input type="checkbox"/> Public Def.			
<input type="checkbox"/> Private Att.			
<input type="checkbox"/> DOC			
<input type="checkbox"/> CTC Staff			
<input type="checkbox"/>			

CLIENT INFORMATION:

Client Name:

DOB: / /

Phone #: () -

SID #:

Location: ECC Jail Own Residence Other:

Pending Case # plus out of State cases:

County:

List all prior Out Of State Offenses:

REASON FOR EVALUATION:

Treatment Court Referred

ATR

Non PSI Felony

Joint Agreement

Other:

TYPE OF EVALUATION:

<input type="checkbox"/> Core COMPAS	<input type="checkbox"/> NIJ Mental Health	<input type="checkbox"/> URICA (motivation scale	<input type="checkbox"/> TCU AODA
<input type="checkbox"/> Static 99	<input type="checkbox"/> TCU Criminal Thinking	<input type="checkbox"/> PCL-C Trauma Screen	<input type="checkbox"/> UNCOPE

Send the completed referral to:

Nathaniel Murken – 124 S. Barstow St., EC – 715-577-6035 – EauClaire.JailAssessor@lsswis.org

Completed Compas will be returned to referring agency for dissemination within 2 weeks unless noted otherwise

COMPAS – Criminal History Check (validation) – Portal 100

Use of criminal history would be just to verify self-report – Please complete to the best of your ability.

7. How many times has this person been arrested before as an adult or juvenile (criminal arrests only)?
8. How many prior juvenile felony offense arrests?
9. How many prior juvenile violent felony offense arrests?
10. How many prior commitments to a juvenile institution?
11. How many times has this person been arrested for a felony property offense that included an element of violence?
12. How many prior murder/voluntary manslaughter offense arrests as an adult?
13. How many prior felony assault offense arrests (not murder, sex, or domestic violence) as an adult?
14. How many prior misdemeanor assault offense arrests (not sex or domestic violence) as an adult?
15. How many prior family violence offense arrests as an adult?
16. How many prior sex offense arrests (with force) as an adult?
17. How many prior weapons offense arrests as an adult?
18. How many prior drug trafficking/sales offense arrests as an adult?
19. How many prior drug possession/use offense arrests as an adult?
20. How many times has this person been sentenced to jail for 30 days or more?
21. How many times has this person been sentenced (new commitment) to state or federal prison?
22. How many times has this person been sentenced to probation as an adult?