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Minnesota Pretrial Questionnaire

ሚኒሶታ ቅድመ ችሎት መጠይቅ

Name (Last) ስም (አያት)	(First) (የራሱ)	(Middle) (አባት)
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County of Residence የሚኖሩበት ሀገር	Duration ጊዜ yr/አመት mo/ወር	DOB የወልደት ቀን	Age እድሜ
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Street Address ጎዳና አድራሻ	Apt # አፓርት ማ#	City ከተማ	State ግዛት	ZIP ዚፕ
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Mailing Address የመልዕክት መላኪያ አድራሻ	Apt # አፓርት ማ#	City ከተማ	State ግዛት	ZIP ዚፕ
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Employment/ Education ቅጥር/ትምህርት	1. Are you currently employed?/አሁን ተቀጣሪ ነዎት? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ
	If Yes/አዎ ከሆነ: <input type="checkbox"/> Full-time/የሙሉ ጊዜ <input type="checkbox"/> Part-time/የክፍል ጊዜ
	If Part-time/የክፍል ጊዜ ከሆነ: <input type="checkbox"/> 20+ hrs/week/20+ ሰዓታት/ሳምንት <input type="checkbox"/> Less than 20 hrs/week/20 ሰዓታት/ሳምንት
Employment/ Education ቅጥር/ትምህርት	2. Do you currently attend school?/አሁን ትምህርት እየተከታተሉ ነዎት? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ
	If Yes/አዎ ከሆነ: <input type="checkbox"/> Full-time/የሙሉ ጊዜ <input type="checkbox"/> Part-time/የክፍል ጊዜ
	If Part-time/የክፍል ጊዜ ከሆነ: <input type="checkbox"/> 20+ hrs/week/20+ ሰዓታት/ሳምንት <input type="checkbox"/> Less than 20 hrs/week/20 ሰዓታት/ሳምንት
Employment/ Education ቅጥር/ትምህርት	3. If you attend school and work, do your hours for both total 20 hours or more?/ትምህርት እየተከታተሉ እና እየሰሩ ከሆነ፣ ለሁለቱም የሚያውሉት አጠቃላይ ሰዓታት 20 ወይም የበለጠ ይሆናል? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ

Employment/ Education ቅጥር/ትምህርት	4. If you do not work outside the home, do you receive income from public assistance, social security benefits of any kind, disability benefits, or pension benefits?/ከቤት ውጪ የሚይደሉ ከሆነ ከመንግስት ድጋፍ ገቢ፣ ማንኛውም አይነት የማህበራዊ ዋስትና ጥቅማ ጥቅሞች፣ የአካል ጉዳተኝነት ጥቅማ ጥቅሞች፣ ወይም የጡረታ ጥቅማ ጥቅሞች ያገኛሉ? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ
	5. If you do not work outside the home, do you have financial support while you care for children elderly parents, or a relative?/ከቤት ውጪ የሚይደሉ ከሆነ፣ ልጆችን፣ አዛውንት ወላጆችን፣ ወይም ዘመድ ሲንከባከቡ የገንዘብ ድጋፍ አለዎት? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ

Housing የመኖሪያ ቤት	6. Have you had three or more addresses during the past 12 months?/በአለፉት 12 ወራት ውስጥ ሶስት ወይም ከዛ በላይ አድራሻዎች ነበረዎት? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ
	7. Have you moved between friends, family, and/or shelters during the past 12 months?/በአለፉት 12 ወራት ውስጥ ለቀው ወደ ጓደኞች፣ ቤተሰብ፣ እና ወይም 'መጠለያዎች' ሄደዋል? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ
	8. If you do not have stable housing, do you consider yourself homeless?/የተረጋጋ የመኖሪያ ቤት ከሌለዎት፣ ራስዎን እንደ ቤት የለሽ አድርገው ይቆጥራሉ? <input type="checkbox"/> Yes/አዎ <input type="checkbox"/> No/አይ

over →
ጀርባውን ይመልከቱ

