Minnesota Pretrial Questionnaire
Su'aalaha xog ururinta Xukunka ka hor ee Minnesota

Name **(Last)** *Magaca (Dambe)*	**(First)** *(Koowaad)*	**(Middle)** *(Dhexe)*

County of Residence *Degmadda la Degenyahay*	Duration *Muddada*		DOB *Taariikhda Dhalashada*	Age *Da'da*
	yr/*sanadka*	mo/*bil*		

Street Address *Cinwaanka Jidka*	Apt # *Dabaqa #*	City *Magaalada*	State *Gobolka*	ZIP *Sibka*

Mailing Address *Cinwaanka Boostada*	Apt # *Dabaqa #*	City *Magaalada*	State *Gobolka*	ZIP *Sibka*

Employment/ Education *Shaqada/ Waxbarashadda*	**1. Are you currently employed?**/*Hadda miyaad shaqaysaa?*……………………………… ☐ **Yes/***Haa* ☐ **No/***May* **If Yes/***Haddii haa***:** ☐ **Full-time/***Wakhtiga buuxa* ☐ **Part-time/***Nus gelin* **If Part-time/***Haddii nus gelin***:** ☐ **20+ hrs/week/***20+ saac/todobaadka* ☐ **Less than 20 hrs/week/***Ka yar 20 saac/todobaadka* **2. Do you currently attend school?**/*Hadda miyaad dhigataa dugsiga?*………………… ☐ **Yes/***Haa* ☐ **No/***May* **If Yes/***Haddii haa***:** ☐ **Full-time/***Wakhtiga buuxa* ☐ **Part-time/***Nus gelin* **If Part-time/***Haddii nus gelin***:** ☐ **20+ hrs/week/***20+ saac/todobaadka* ☐ **Less than 20 hrs/week/***Ka yar 20 saac/todobaadka* **3. If you attend school and work, do your hours for both total 20 hours or more?**/*Haddii aad dugsiga dhigato iyo shaqo, miyay saacadahaaga labbaduba wadartoodu tahay 20 saacadood ama ka badantahay?* ………………………………… ☐ **Yes/***Haa* ☐ **No/***May* **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?**/*Haddii aanad ka shaqayn dibadda guriga, miyaad ka heshaa dakhli caawimada dad waynaha, dheefaha amniga bulshadda nooc kastaba, dheefaha naafanimada, ama dheefaha hawl gabka?* ……………………………………………………………………………… ☐ **Yes/***Haa* ☐ **No/***May* **5. If you do not work outside the home, do you have financial support while you care for children elderly parents, or a relative?**/*Haddii aanad ka shaqayn dibadda guriga, miyaad haysataa taageerada dhaqaalaha marka aad daryeesho carruurta waalidka duqayda ah, ama qaraabada?*………………………………………………………… ☐ **Yes/***Haa* ☐ **No/***May*
Housing *Guriyayanta*	**6. Have you had three or more addresses during the past 12 months?**/*Miyaad lahayd saddex ama cinwaano guri ka badan muddada 12 bilood ee la soo dhaafay?* …………… ☐ **Yes/***Haa* ☐ **No/***May* **7. Have you moved between friends, family, and/or shelters during the past 12 months?**/*Miyaad u guurtay dhexda saaxiibada, qoyska, iyo/ama guryaha gaboodka ah muddada 12 bilood ee la soo dhaafay?*…………………………………………………….. ☐ **Yes/***Haa* ☐ **No/***May*

Somali

	8. If you do not have stable housing, do you consider yourself homeless?/*Haddii aanad haysan guri la dego oo degen, miyaad naftaada uga fekertaa qof aan hoy lahayn?* ……………………………………………………………						☐ Yes/*Haa* ☐ No/*Maya*

Substance Use *Isticmaalka Maandoori yaha*	**9. Within the last 12 months have you committed a crime while under the influence of alcohol or mood-altering chemicals?**/*Gudaha 12 bilood ee la soo dhaafay miyaad gashay dembi marka ay ku saamaysay isticmaalka khambarada ama kimikada dareenka beddesha?* …………………………………………………….☐ Yes/*Haa* ☐ No/*Maya*
	10. Within the past 12 months have you chosen to enter substance abuse treatment?/*Gudaha 12 biilood ee la soo dhaafay miyaad dooratay inaad gasho daawaynta isticmaalka maandooriyaha?* …………………………………….☐ Yes/*Haa* ☐ No/*Maya*
	11. Within the past 12 months have you been court-ordered to do a chemical health evaluation or receive chemical health treatment?/*Gudaha 12 biilood ee la soo dhaafay miyay maxkamad kugu amartay inaad samayso qiimaynta caafimaadka ee kimikada ama miyaad heshay daawaynta caafimaadka ee kimikada?* …………………………….. ☐ Yes/*Haa* ☐ No/*Maya*
	12. Within the past 12 months, have alcohol or mood-altering chemicals contributed to problems with your intimate relationship, family, work, or school?/*Gudaha 12 biilood ee la soo dhaafay, miyay khamro ama kimikada beddesha dareenka wax ku biirisay dhibaatooyinka xidhiidhkaaga kalgacalka, qoyska, shaqada, ama dugsiga?*.........☐ Yes/*Haa* ☐ No/*Maya*
	13. Have you had an alcohol abuse problem in the last six months?/*Miyaad lahayd dhibaatada si xun u isticmaalka maandooriyaha lixdii biilood ee u dambaysay?*.................☐ Yes/*Haa* ☐ No/*Maya*
	14. Have you used illegal mood-altering chemicals during the last six months?/*Miyaad isticmaashay kimikada beddesha dareenka ee sharci darrada ah lixdii biilood ee u dambeeyay?* …………………………………………………….. ☐ Yes/*Haa* ☐ No/*Maya*

Communi ty Ties *Xidhiidhk a Bulshada*	**15. What is your marital status?** *Waa maxay heerkaaga guurku?*	☐ **Married** *Xaas ah*	☐ **Divorced** *La furay*	☐ **Separated** *Kala maqan*	☐ **Widowed** *Lammaane ka dhintay*		☐ **Never Married** *Weligeed ma guursan*
	16. How many minor children or others live with you or receive financial support from you?/*Imisa carruur aad u yaryar ama kuwa kale ayaa adiga kula nool ama kaa hela adiga taageerada dhaqaalaha?*						
	Children/*Carruur* _____ **ta:**		**Others**/*Kuwa kale:* _____				
	Total/*Wadarta* …………………………………………………..						_____

Military *Ciidanka*	**17. Have you ever been in or served in the United States armed forces?**/*Weligaa miyaad ku jirtay ama ka adeegtay Ciidamada xoogga ee Maraykanka?* …………………	☐ Yes/*Haa* ☐ No/*Maya*

Please enter the name, relationship, and phone number of someone who knows you well/*Fadlan geli magaca, xidhiidhka, iyo lambarka telefoonka qof si wanaagsan adiga kuu garanaya*:	**Name**/*Magaca*	**Relationship**/*Xidhiidhka*	**Phone**/*Telefoonka*

Systems Checked (Probation use only) *Nidaamka La hubiyay (Isticmaalka tijaabin oo keliya)* ☐ BCA ☐ CSTS ☐ S3 ☐ MNCIS/MGA ☐ CISR ☐ GLWS ☐ DL ☐ JMS	**P.O.**