

Tuscaloosa Bail Out Referral Form

* Required

1. Your Name *

2. Your Phone Number *

3. Your Email Address

4. Full Legal Name of Person in Need of Bail *

5. Name of Jail Detained

6. Date of Arrest

Example: January 7, 2019

7. Bail Amount (If you are unsure, contact...) *

8. Does this person consent to being bailed out with our assistance?

Mark only one oval.

Yes

No

Maybe

9. Does this person have any attorney or public defender? If so, please list their name and any contact information you have.

10. Person's Date of Birth

Example: January 7, 2019

11. Is this person currently on probation or parole?

Mark only one oval.

Yes

No

Maybe

12. Is this person subject to any holds or detainers (for example, probation, parole, immigration, warrants)?

Mark only one oval.

Yes

No

Maybe

13. Will this person need a ride? If not, who will we need to contact to ensure they are there when we post bail. *

14. Is this person experiencing homelessness? If so, is there a specific location we should return them to? If where they will stay is unknown, let us know and we will try our best to coordinate/ find resources for them.

15. Once released, will this person have access to a phone?

Mark only one oval.

Yes

No

Maybe

16. If they have access to a phone or are provided with one, would they consent to court reminders?

Mark only one oval.

Yes

No

Maybe

17. Does this person speak English? If not, please list their language.

18. Once released, will this person prefer referrals to any local resources (mental health, food banks) or food assistance? If yes, please describe.

19. Does this person have any medical issues we should be aware of?
