



FELONY QUESTIONNAIRE

Name _____

1. Have you been convicted of more than one felony? Yes___ No___
(If yes, you must complete a separate questionnaire for each conviction.)

2. What was the charge for which you were convicted?

3. What is the date of your conviction? _____

4. Was time served? Yes___ No___ How much? _____

5. When were you released? _____

6. Are you now on probation? Yes___ No___

7. Were you declared guilty of a felony that caused you to be listed on the national registry for your felony?
Yes___ No___

8. Were you saved at the time? Yes___ No___

9. When were you first converted? _____

10. What have you learned from this experience?

Signed _____ Date _____