

NEVADA PRETRIAL RISK (NPR) ASSESSMENT

Assessment Date: ____/____/____ Assessor: _____ County: _____

Defendant's Name: _____ DOB: ____/____/____ Case/Booking #: _____

Address: _____ Contact Phone#: _____ # of Current Charges: _____

City State Zip

Most Serious Charge: _____ Initial Total Bail Set: \$ _____

Demographic Information (optional): Gender: Male _____ Female _____
Race: Hispanic _____ White _____ Black _____ Asian _____ Nat. Amer. _____ Other/Unknown _____

SCORING ITEMS

SCORE

1. **Does the Defendant Have a Pending Pretrial Case at Booking?**
 - a. Yes - 2 pts. If yes, list case # and jurisdiction: _____
 - b. No - 0 pts. _____
2. **Age at First Arrest (include juvenile arrests)** First Arrest Date: ____/____/____
 - a. 20 yrs. and under - 2 pts. _____
 - b. 21-35 yrs. - 1 pt. _____
 - c. 36 yrs. and over - 0 pts. _____
3. **Prior Misdemeanor Arrests (past ten years)** Total # of Misdemeanor Arrests: _____
 - a. Two or less - 0 pts. _____
 - b. Three or more - 2 pts. _____
4. **Prior Felony/Gross Misd. Arrests (past ten years)** Total # of Felony/GM Arrests: _____
 - a. None or one - 0 pts. _____
 - b. Two or more - 2 pts. _____
5. **Prior Violent Arrests (past ten years)** Total # of Violent Arrests _____
 - a. None - 0 pts. _____
 - b. One or more - 2 pts. _____
6. **Prior FTAs (past 24 months)**
 - a. None - 0 pts. _____
 - b. One FTA Warrant - 1 pt. _____
 - c. Two or more FTA Warrants - 2 pts. _____
7. **Employment Status at Arrest**
 - a. Verifiable Full/Part-time Employment - 0 pts.
(e.g. Self-employed, Disabled and receiving benefits, Student, Retired, Military, Stay at Home Parent, etc.)
 - b. Unemployed - 2 pts. _____
8. **Residential Status**
 - a. Nevada Resident - living in current residence 6 months or longer - 0 pts.
 - b. Nevada Resident - not lived in same residence 6 months or longer - 1 pt.
 - c. Homeless or non-Nevada Resident - 2 pts. _____
9. **Substance Abuse**
 - a. Other - 0 pts.
 - b. Prior **multiple** arrests for drug use or possession/alcohol/drunkenness - 2 pts. _____
10. **Verified Cell Phone**
 - a. Yes - 0 pts. If yes, list #: _____
 - b. No - 2 pts. _____

TOTAL SCORE: _____

Risk Level (Circle One): **LOW** (0-4 pts.) **MODERATE** (5 - 10 pts.) **HIGHER** (11+ pts.) **OVERRIDE?:** Yes ____ No ____

Override Reason(s): Mental Health _____ Disability _____ Gang Member _____ Flight Risk _____
Prior Record More Severe than Scored _____ Prior Record Less Severe Than Scored _____
In past five years, Prior Successful Pretrial Supervision _____ Other, explain: _____

Final Recommended Risk Level: **LOW** _____ **MODERATE** _____ **HIGHER** _____

Supervisor/Designee Signature: _____ **Date:** ____/____/____