

District VI Juvenile Detention Center

Probation Information Form

Juvenile's name:

Date:

S.S.N.:

D.O.B.:

Father	Mother	Guardian / Where juvenile is living
Name:	Name:	Name:
SSN:	SSN:	SSN:
Address:	Address:	Address:
Home phone:	Home phone:	Home phone:
Work phone:	Work phone:	Work phone:

Visitation Request: per policy, the people listed below must be approved to have access to visitation.

Step Father:		SSN:	
Step Mother:		SSN:	
Other family member over 18:		SSN:	
Other family member over 18:		SSN:	

Reason for placement:

New charge(s) or nature of PV:	
Original charge(s), why on probation:	

Background information: Some juveniles are placed together in a dorm sleeping arrangement. The following info. is needed for this reason.

Does the juvenile have any sexual perpetrator or victim issues?	Yes		No	
Is the juvenile a child protection or mental health case?	Yes		No	
Has the juvenile exhibited any suicidal behavior?	Yes		No	

Contact restrictions: policy allows the juvenile daily contact with the probation officer. If you would like to restrict this contact indicate below.

Restrictions of juvenile's contact with probation:	
Individuals who should have no contact with juvenile:	

Probation Officer:

Case Worker:

Signature – probation officer/court

Date