

**YOUTH SERVICES BUREAU
COURT DIVERSION REFERRAL INFORMATION SHEET**

_____ requests that the following juvenile be considered for the
(Referring Agency) Youth Services Bureau:

- | | |
|---|---|
| <input type="checkbox"/> COURT DIVERSION | <input type="checkbox"/> CHALLENGE COURSE (Fee Applies) |
| <input type="checkbox"/> COUNSEL & RELEASE | <input type="checkbox"/> TEEN COURT |
| <input type="checkbox"/> REPARATIONS (Tobacco Related Offenses) | |

The above program has been explained to the youth and family and they understand that they have been referred to the Youth Services Bureau.

NAME: _____ DOB: _____

ADDRESS: _____ TELEPHONE: _____

MOTHER'S / GUARDIAN'S NAME _____ WORK # _____

FATHER'S/GUARDIAN'S NAME _____ WORK # _____

YOUTH LIVES WITH _____

OFFENSE: _____

DATE OF OFFENSE: _____

YES NO

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1) Youth has clearly admitted guilt to the offense. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2) You think he/she is telling the whole story, including implication of others, if applicable. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3) He/she has been cooperative with you. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4) His/her family has been cooperative |
| <input type="checkbox"/> | <input type="checkbox"/> | 5) The Police Department has had prior contact with this youth? |

Paper Work Included: (Please Check)

- | | |
|--|---|
| <input type="checkbox"/> Police Report | (Optional) |
| <input type="checkbox"/> Defendant Statement | <input type="checkbox"/> Juvenile Miranda |
| <input type="checkbox"/> Victim Statement | <input type="checkbox"/> Arrest Report |
| <input type="checkbox"/> Witness Statement | <input type="checkbox"/> Other |
| <input type="checkbox"/> Restitution Breakdown (If applicable) | |

Contract Recommendations: (Optional)

- | | |
|--|---|
| <input type="checkbox"/> Challenge Course | <input type="checkbox"/> Restitution \$ _____ |
| <input type="checkbox"/> YES Shoplifting Program (Fee Applies) | <input type="checkbox"/> Community Service |
| <input type="checkbox"/> Other: | |

Additional Comments