

DuPage County Detention Screening Form for Automatic Cases

JUVENILE INFORMATION		
Name: _____	date: _____	
Address: _____ _____	phone: () _____	
county: _____		
D.O.B.: _____	Age: _____	sex: M F
U.S. Citizen: Y N	Race: _____	religion: _____

PARENT/GUARDIAN INFORMATION	
Name: _____	Name: _____
Relation: _____	Relation: _____
Address: _____ _____	Address: _____ _____
Home phone: _____	Home phone: _____
Work phone: _____	Work phone: _____
DCFS Caseworker: _____ phone: _____ time/date contacted: _____	
Probation Officer: _____ phone: _____ time/date contacted: _____	

REFERRING AGENCY INFORMATION
Date/Time of Arrest: _____
Date/Time of Detention Request: _____
Individual Requesting (first and last name and badge#) _____ phone: _____
Agency/Department: _____

AUTOMATIC DETENTION CASES		
reference source: <input type="checkbox"/> Police Ofc. <input type="checkbox"/> Probation <input type="checkbox"/> DuPage Court <input type="checkbox"/> Other _____		
Escape from Secure Custody	Detain	
Warrant Active Warrant # _____ For: FTA New Charges MFP WU Other	How Warrant Served: Turned Self In Police Contact Other _____	Detain
Court Order Case Number: _____ Release/Next Court Date: _____ Special Instructions: _____	Detain	
Home Detention Violation	New Charges Technical	Detain
Other	DOC Hold Out of County Request SWAP Violation (must include new charge)	Detain

PRIOR CONVICTIONS/ADJUDICATIONSreference source: Police Ofc. Probation Parent Court Minor Tracker DCFS DCJDC Other _____

Prior Convictions/Adjudications: _____
 (Offense and Date) _____

FAILURE TO APPEAR RISKreference source: Police Ofc. Probation Court Tracker DCFS DCJDC Parent Minor Other _____

Minor left jurisdiction or placement in violation of Court rules (within past 2 years)	Yes	No
Minor is currently a runaway	Yes	No
Minor resides out of county	Yes	No
Prior runaways	Yes # _____	No

PRIOR WARRANTSreference source: Police Ofc. Probation Court Tracker DCFS DCJDC Parent Minor Other _____

Prior Warrants for: FTA # _____ New Charges # _____ Other # _____
 Missing From Placement # _____ Whereabouts Unknown # _____

LEGAL STATUSreference source: Police Ofc. Probation Court Tracker DCFS DCJDC Parent Minor Other _____

Probation Status:
 On Intensive Probation Services
 On Probation less than 6 months
 On Probation more than 6 months
 On Supervision, Juvenile Diversion, or Temporary Rules

Pending Cases: Number: _____
 Charges: _____

MEDICAL CLEARANCEreference source: Police Ofc. Probation Court DCFS DCJDC Parent Minor Other _____

Is the juvenile ill, injured, or under the influence of drugs or alcohol?	No
injury: _____ illness: _____ under the influence drug _____ date/time last used: _____ other: _____	Yes (medical clearance may need to be obtained)

NOTIFICATION

ETA: _____ (am) (pm)	Guardian Notification: Detention Hearing DCJDC Procedures Legal Counsel
Detention Hearing Date and Time: _____	
JDO Completing Screening: _____	Name of Guardian Notified: _____
Supervisor: _____	Date/Time Notified: _____
	Attempt to Contact _____ (date and time)

