

INTERSTATE COMPACT FOR JUVENILES FORM III CONSENT FOR VOLUNTARY RETURN OF OUT OF STATE JUVENILE

I,		, acknowledge that I legally belong					
		(Name of Juvenile)					
				in			
(Legal G	uardian, Custodial Agend	y, or Demanding Cou	ırt/Agency se	eking return)	(City)	(State)	
	arily consent to retur opriate authority may		•	eedings, either b	y myself or in the co	ompany of such person(s)	
	(Date)			(Juvenile's Signature)			
l o				of (Court or Jurisdiction in Holding State)			
',	(Judge / Court Na	ime)	, 01	(Co	ourt or Jurisdiction in Hol	ding State)	
having informed the juvenile named above of			his	his her rights under the Interstate Compact for Juveniles			
prior to the e	execution of the fore	going consent, do	hereby fi	nd that the volun	tary return of said ju	venile to:	
	(Leg	al Guardian, Custodia	al Agency, or	Demanding Court/A	gency seeking return)		
	(Contact Name)	1		(Phone #)	(City)	(State)	
io appropria			ماند ماند	,		(State)	
is appropria	te and in the best int	erest or said juve	rille, and c	io so order such	return.		
(Date) (Judge / Court Signature)						<u> </u>	
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TO BE COMI	PLETED ONLY IF CO	UNSEL OR GUAR	DIAN AD L				
l,	(Name of Attorney)	being the	Couns	el Guardian A	Ad Litem of		
	,						
attest that I	have consulted with	the juvenile rega	rding his/h	er decision to vo	luntarily consent to	return to:	
	ian, Custodial Agency, or			in	(City)		
(Legal Guard	ian, Custodial Agency, or	Demanding Court/Ag	jency seekin	g return)	(City)	(State)	
	(Date)			(Cianad	Councel or Cuardian	Ad Litam)	
(Form will be c	certified or authenticated in	n accordance with pra	actice of the o		 Counsel or Guardian A 	Ad Litem)	
DETAILED D	HYSICAL AND CLOT	HING DESCRIPTION	======= N OF IIIV	======================================		=======================================	
DOB:	Race:	Sex:			Eye color:	Hair color:	
					Lyo color.		
Tattoos, sca	ars, identifying marks	s:					
Clothing (inc	cluding shoes):						
Juvenile's P	hysical Location in F	lolding State:					
				(Facility Name) (Phone #)			
	(Street Addre	ss)		(City)	(Sta	ate) (Zip Code)	
ICJ FORM III	,			. •,	,	Page 1 of 1	