**If someone else is entering your case in UNITY this form is required. If you are entering the juvenile file into UNITY you do not need to complete this form.**

**Questions? Contact**

Anne Connor, Deputy Compact Administrator, (208)577-5405 or anne.connor@idjc.idaho.gov

Jen Baer, Idaho Interstate Coordinator, (208)577-5406 or jennifer.baer@idjc.idaho.gov

\* Denotes Required Field

|  |
| --- |
| **Case Type Selector:**  |
|  |
| \*Receiving State: | Click for drop-down |
|  |
| \*Type of Transfer: | Click for drop-down |
|  |
| \*Present Location: | Click for drop-down |
| If not already in Receiving State, will juvenile be proceeding to RS prior to acceptance of TOS: | Click for drop-down |
|  |
| \*Sex-Related Offense: | Click for drop-down |
| **(Only applicable for sex-related/State Committed Transfer Cases)**Emergency reason juvenile relocated to receiving state prior to acceptance: | Click to enter text   |

|  |
| --- |
| **Current Residence:** |
|  |
| \*First Name:  | Click to enter text  | \*Last Name: | Click to enter text  |
|  |
| \*Relationship: |  Click for drop-down | If Other, Specify: | Click to enter text | Facility Name (if applicable): | Click to enter text  |
|  |
| \*Address: | Click to enter text  |
|  |
| \*City: | Click to enter text | \*State: | Click for drop-down | \*Zip: | Click to enter number |
|  |
| \*Primary Phone: | Click to enter number |

|  |
| --- |
| **Current Legal Guardianship:** |
|  |
| \*Legal Guardianship: | Click for drop-down | Custodial Agency Name: **(only applicable if State Ward)** | Click to enter text  |
|  |
| \*First Name: | Click to enter text  | \*Last Name: | Click to enter text  |
|  |
| \*Relationship: | Click for drop-down | If Other, Specify: | Click to enter text  |
|  |
| Address: | Click to enter text  |
|  |
| City: | Click to enter text | \*State: | Click for drop-down | Zip: | Click to enter number |
|  |
| Primary Phone: | Click to enter number |

|  |
| --- |
| **Referral Information:** |
|  |
| Assistance needed from Receiving State to obtain juvenile’s signature on Form VI |[ ]

|  |
| --- |
| **Court Information:** |
|  |
| \*Probation Start Date: | Click to enter a date |

* **Below data is only needed if juvenile is under supervision in more than 1 court case**
	+ Court case information is needed for **each** active court case

|  |
| --- |
| **Additional Court Information:** |
|  |
| Court Case #: | Click to enter text | County of Jurisdiction: | Click to enter text |
|  |
| \*Probation Start Date: | Click to enter a date | \*Maximum Probation Expiration Date: | Click to enter a date |
|  |
| \*Date of Adjudication: | Click to enter a date | \*Sex-Related Offense: | Click for drop-down |
|  |
| \*Adjudicated Offense(s) Resulting in Supervision: | Click to enter text  |