



**IDJC Rule 19 Screening Report**  
 **JSC Summary**

**IDJC Rule 19 Screening Report Completed By:** [CLICK HERE AND TYPE]  
**Date of Report:** [CLICK HERE AND TYPE]

**JSC Summary Completed By:** [CLICK HERE AND TYPE]  
**Date of Report:** [CLICK HERE AND TYPE]  
**Sources of Information:** [CLICK HERE AND TYPE]

**SECTION 1**  
**Juvenile Information**

**Juvenile:** «LastName», «FirstName» «MiddleName» **IJOS:** «IJOS\_ID»  
**Gender:** «Gender» **Race/Ethnicity:** «Ethnicity»  
**Date of Birth:** «DOB» **Juvenile Marital Status:** «MaritalStatus»  
**Age:** «Age» **Number of Children:** [CLICK HERE AND TYPE]  
**Legal Custody of Juvenile:**  Self  Joint  Father  Mother  Guardian,  
[CLICK HERE AND TYPE]  
**Parent/Guardian contacts:** [CLICK HERE AND TYPE]

**Court Information**

**Date of Commitment:** «CommitDate»  
**Committing Case Number(s):** «CommittingPetitions»  
**Committing County:** «CommitCounty» **Probation Officer:** «JPOName»  
**Committing Judge:** «JudgeName»  
**Committing Case(s) Restitution Amount:** \$[CLICK HERE AND TYPE]  
**Committing Case(s) Community Service Hours:** [CLICK HERE AND TYPE]  
**Special Conditions from Decree Order:** [CLICK HERE AND TYPE]

**SECTION 2**  
**Rule 19 Screening Information**

- 1. Date(s) of screening(s):** [CLICK HERE AND TYPE]
- 2. Date of disposition:** [CLICK HERE AND TYPE]
- 3. Most recent YLS/CMI (or alternative risk/needs assessment) total score, level of risk, and date:** [CLICK HERE AND TYPE]
- 4. Current status of probation supervision:**  Supervised  Unsupervised  
 Not on Probation  Other: [CLICK HERE AND TYPE]  
**Additional relevant information:** [CLICK HERE AND TYPE]

«LastName», «FirstName»

IJOS «IJOS\_ID»

[CLICK HERE AND TYPE REPORT DATE]

5. Prior probation interventions utilized: [CLICK HERE AND TYPE]

6. Mental health/Psychiatric:  Yes  No  Unknown

Assessments administered: [CLICK HERE AND TYPE]

Treatment(s) and/or resources accessed: [CLICK HERE AND TYPE]

7. Substance abuse:  Yes  No  Unknown

Assessments administered: [CLICK HERE AND TYPE]

Treatment(s) and/or resources accessed: [CLICK HERE AND TYPE]

8. Sexual misconduct:  Yes  No  Unknown

Assessments administered: [CLICK HERE AND TYPE]

Treatment(s) and/or resources accessed: [CLICK HERE AND TYPE]

9. Developmental disability:  Yes  No  Unknown

Assessments administered: [CLICK HERE AND TYPE]

Treatment(s) and/or resources accessed: [CLICK HERE AND TYPE]

10. Additional assessments needed to identify needs:  Yes  No

If yes, explain: [CLICK HERE AND TYPE]

11. Additional community resources available to address needs:  Yes  No

If yes, explain: [CLICK HERE AND TYPE]

12. Family's structure/dynamics

Current living arrangements: [CLICK HERE AND TYPE]

Family engagement in treatment and supervision: [CLICK HERE AND TYPE]

Investigation by Child Protection:  Yes  No  Not addressed or Unknown

Substantiated case of abuse/neglect:  Yes  No  Not addressed or Unknown

13. Education:

Academic performance: [CLICK HERE AND TYPE]

Behavior (attendance, misconduct, and discipline): [CLICK HERE AND TYPE]

14. Other relevant information: [CLICK HERE AND TYPE]

15. Participant recommendations (complete table below):

Representing	Recommend	Recommended Actions
<b>Probation</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>H&amp;W</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>IDJC</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>Parent/Guardian</b> Name:	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain	[CLICK HERE AND TYPE]

«LastName», «FirstName»

IJOS «IJOS\_ID»

[CLICK HERE AND TYPE REPORT DATE]

Representing	Recommend	Recommended Actions
[CLICK HERE AND TYPE]	Commitment <input type="checkbox"/> Other <input type="checkbox"/>	
<b>Prosecuting Attorney</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>Defense Attorney</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>Education</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>Other</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]
<b>Other</b> Name: [CLICK HERE AND TYPE]	<input type="checkbox"/> Commitment <input type="checkbox"/> No Commitment <input type="checkbox"/> Suspended <input type="checkbox"/> Abstain Commitment <input type="checkbox"/> Other	[CLICK HERE AND TYPE]