

## INTERSTATE COMPACT FOR JUVENILES QUARTERLY PROGRESS REPORT

**FORM IX** 

TO:	1	FROM:				
TO: (Sending State)		FROM:(Receiving State)				
Sending State Court/Case #(s):						
Name of Juvenile:		DOB:				
Address:						
(Stree	et address)	(City)	(State)	(Zip)		
Primary Phone #:	Supervision Level:		Maximum Exp. Date:			
Supervising Agent's last personal of	contact with juvenile:					
			(Date)			
	QUARTERLY PRO	GRESS REPORT				
SUMMARY OF ADJUSTMENT IN general attitude towards current liv		ly relationships, con	npliance with home rules,	and overall		
SUMMARY OF SCHOOL AND/OF disciplinary concerns):	R EMPLOYMENT PERFORI	MANCE (including a	any attendance, behaviora	ll and/or		
STATUS OF COURT-ORDERED	CONDITIONS OF SUPERV	ISION (treatment/co	ounseling, community serv	vice, etc.):		

	_		(Compact Official)	(Dat	e)
(Supervising Agent) (Dat	te)		(Supervisor)	(Date	e)
Submitted by:					
IF REQUESTED, JUSTIFICATION FOR EARLY DIS	CHARGE CO	ONSIDE	RATION:		
RECOMMENDATION: Continue Sup	ervision		Request Discharge		
SUMMARY OF ANY BEHAVIORAL ISSUES AND DI (including therapeutic interventions, incentives and/o					
Date of New Charges: Sta	atus/Dispositi	on of Ne	ew Charges:		
charges below:					
If YES, please provide court documents and a brief e	explanation o	f the cur	rent legal situation and/or a de	escription of	
PENDING CHARGES IN THE RECEIVING STATE?	YES	NO	COURT APPEARANCES?	YES	NO
complete task).					
complete task):					

For ICJ Official use only:					
SENDING STATE RESPONSE TO DISCHARGE OR REVOCATION REQUEST:					
Action To Be Taken:			Date Action Will Occur:		
(Compact O	rfficial)	(Date)	_		

ICJ QUARTERLY PROGRESS REPORT | Rev.