

INSTRUCTIONS MONTHLY JUVENILE SUMMARY – JUVENILE FACILITY

This log should include all juveniles, including delinquent offenders, status offenders, and non-offenders, who have been held in your facility during the month. If your facility uses an admissions log, report, or other form that includes the pieces of information identified in this report (date of birth, race, gender, reason for detention, time locked, and time released) for each juvenile securely detained, you may submit that documentation in lieu of completing this report.

Please submit a copy of your completed form, or a similar document, within five (5) days of the end of the month to Public Policy Associates, Inc. via one of the following options:

1. <http://michigancommitteeonjuvenilejustice.com> to upload this report or enter cases manually under “Monthly Juvenile Reporting”.
2. E-mail completed form to juvenilereports@publicpolicy.com.

Facility Name and Address. Enter the name and complete address of the reporting facility.

Reporting Period (Month/Year). Enter the month(s) and year for which data are being reported.

Initials or Case No. Identify the juvenile by either initials or case number.

Date of Birth. Enter the juvenile’s date of birth in numeric M/D/YY format, e.g., 06/12/89.

Sex. Enter either “M” or “F” to reflect gender.

Race. Use the appropriate alphabetic code as specified: A – Asian, B – Black, H – Hispanic, N - Native American, W – White, O - Other

Current Offense (VCO or other charge). List the offense that resulted in the current detention. If the juvenile was detained for violating a valid court order, then “VCO” would be the appropriate entry.

Previous Adjudication. If the juvenile is a court ward, list the *most serious previous offense* for which the juvenile is under the jurisdiction of the court.

Valid Court Order Provisions: If the juvenile was alleged to have committed a status offense in violation of a court order, did the court provide the facility with an order containing the following elements? (Check all that apply)

Court Order. Identification of the original court order that was violated

Basis for Violation. Explanation of the factual basis for reasonable cause to believe that the juvenile violated such order

Basis for Placement. Findings of fact to support determination that there is no appropriate less-restrictive alternative available

Time Limit. Specification of the length of time that the juvenile may remain in a secure juvenile facility (Note: length of time may not exceed 7 days and cannot be extended or renewed)

Release Plan. A plan for the juvenile's release from the facility

Date and Time Entered Locked Area. Enter the date and time that the juvenile is placed in secure detention. Date should be entered in numeric M/D/YY format, i.e., 06/12/04 and time should be entered in military time, i.e., 0835.

Date and Time Released. Enter the date and time that the juvenile is released from secure detention. Date should be entered in numeric M/D/YY format, i.e., 06/12/04 and time should be entered in military time, i.e., 0835.

Person Completing Report, Date, Phone. Enter the name, title, and phone number of the person completing the report and the date the report was completed.

Thank you!

**MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
MONTHLY JUVENILE DETENTION SUMMARY**

1. FACILITY NAME					2. FACILITY ADDRESS					3. REPORT MONTH/YEAR		PAGE	
						VALID COURT ORDER PROVISIONS (Only applies to status offenders and non-offenders)							
4. Initials or Case Number	5. Date of Birth	6. Sex M/F	7. Race	8. Current offense (VCO or other charge)	9. Previous Adjudication	10. Court Order	11. Basis for Violation	12. Basis for Placement	13. Time Limit	14. Release Plan	14. Date and Time Entered Locked Area	15. Date and Time Released from Locked Area	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

PERSON COMPLETING REPORT					TITLE					TELEPHONE		
SIGNATURE										DATE		

By authority of the federal Juvenile Justice and Delinquency Prevention Act of 1974, as amended, the Michigan Department of Health and Human Services must provide the U.S. Department of Justice with these statistics.