



## Division of Juvenile Justice Services

### Transfer of Information

Juvenile:

Case #

Date:

#### Medication

Medication #1:  Type: \* # Released: #Received:  
Medication #2:  Type: \* # Released: #Received:  
Medication #3:  Type: \* # Released: #Received:  
Medication #4:  Type: \* # Released: #Received:  
Medication #5:  Type: \* # Released: #Received:  
Medication #6:  Type: \* # Released: #Received:

#### High Risk Behaviors

- Assaultive  Aggressive  Mental health concerns  Gang activity  
 Juvenile is currently on suicide watch  
 Previous suicide attempts in current placement.

Attempt dates:    Other high risk behavior:

#### Property

- Property was searched  Property was not searched  
 Property came with the Juvenile  Property will follow the Juvenile

#### Critical Information

Narrative:

This document is for information only and should not be used for long term treatment planning. Follow all intake procedures and assessments.

Released by:

Facility:

Released to (print): \_\_\_\_\_ (sign): \_\_\_\_\_

Received by:

Facility: