CALCASIEU PARISH POLICE JURY



GOVERNING AUTHORITY OF CALCASIEU PARISH LOUISIANA

Office of Juvenile Justice Services

P.O. Box 2073

Lake Charles, Louisiana 70602 337/721-3900 Fax 337/721-3907

www.cppj.net

Families in Need of Services 14th Judicial District Referral Form

Child's Na	nme:	Date	of Birth:/	/ Age:
Sex:	Race: Caucasian, African Ame	rican, Hispanic/Latino, Asi	an, Native America	, Other:
Child's SS	#: School At	tending:		Grade:
Special Ed	lucation: (Y) or (N) Classific	ation / Comments:		
Legal Gua	rdian(s):	Relationship:	Contact F	Phone:
Mailing A	ddress:	City	y:	Zip:
Students P	Physical Address:	City	:	
Parent's P	Place of Employment:	Work Number: _	Cell Nu	mber:
	Grounds from the Louisiana Chi e of these following categories: Be			
DATE:	<u>//</u>			
730.1	Minor child violate school rules Total Absent Days Excus		D #	-
730.2	Minor child is ungovernable.			
730.3	Minor child is a runaway.			
730.4	Minor has repeatedly possessed or consumed intoxicating beverages, misrepresented age to purchase such beverages or repeatedly loitered around a place that sells such beverages.			
730.5	Minor child has committed an offense applicable only to children. (ex. Curfew, underage drinking)			
730.6	Minor child under 10 years of age committed an act that would be a crime if committed by an adult.			
730.7	The Caretaker causes, encouraged or contributed to the minor child's behavior.			
730.8	The Caretaker refused to attend a meeting with the child's teacher, school principal, or other employee regarding truancy, violation of school rules or other educational problems.			
730.9	Child incompetent to proceed with a delinquency matter under Article 832			
730.10	Child found to be in possession of a handgun			
730.11	Child found to have engaged in cyberbullying			
Additional	I Information: (Please describe b	ehavior and tell us what service	es you think the child i	needs.)
Completed	l by:	Title:	Phone	::
	leasures Taken: (at least 3 of these must be checked	with 2 being behavior strategi	st/counselor and talked	d to parent)
Adr	ninistrator/s talked with student led and talked with parent (Da	(Date://)		Suspensions:
Sen	t letter (Date:/)	<i></i> ,,	2	
Hor	ne visit (Date:/) I meeting with parent (Date:	/ /)	3 Child was ex	pelled:
	I meeting with parent (Date:/ ld talked to SRO (Date:/		Notes:	
Cou	erred to Child Welfare Attendanc unseled by School Counselor (Nan	ne :)		
	erred to Behavior Strategist (Specerced to School-Based Health	ial Ed. Plan)		
		te:/)		