LAW ENFORCEMENT JUVENILE DATA SHEET							
			Incident No.				
Information about the juvenile							
Name		DOB	Gender				
			□Female □Male □Nonbinary □Unknown				
Street Address			Race			Ethnicity	
		☐ Asian	☐ Black		☐ Hispanic		
		☐ Indian	☐ Multiracial		□ Non-Hispanic		
Telephone Number		□ Native Hawa	aiian or Other Pacific Islander Refused				
		☐ Other ☐ Unavailable					
			□ White				
Information about the parents/guardians/custo			77				
Name of Parent/Guardian/Custodian Name of Parent/Guardian/Custodian							
Name of Farency Goal and Conference		Name of Parenty Guardiany Custodian					
Street Address		Street Address					
Town, State, Zip		Town, State, Zip					
Town, State, Zip		Town, State, Zip					
Phone Number	DOB	Phone Nu	mber DOB				
Email Address		Email Address					
2.116.17.16.17.16.17							
Information from Officer							
Date Action Was Taken							
I took the following actions regarding this juvenile on							
☐ I submitted an affidavit for a CHINS petition to the State's Attorney.							
Date of Court Appearance I issued a delinquency citation to the juvenile to appear in court on							
☐ I did not take the child into custody.							
☐ I took the child into custody for the following reason(s):							
CHINS (33 V.S.A. §5301):							
pursuant to a court order under Title 33, Chapters 51, 52, 53							
\Box the child was in immediate danger and removal from home was necessary for the child's							
protection							
☐ I believe the child has run away							
DELINQUENCY (33 V.S.A. §5251):							
pursuant to the laws of arrest.							
☐ pursuant to a court order under Title 33, Chapters 51, 52, 53							
I believe the child committed a delinquent act, and the child's immediate welfare and/or the protection of the community require taking the child into custody.							
Release of child (if applicable)							
Date of Release							
I released the juvenile onto the following person(s):							
\square Parents, guardian, or custodian of the juvenile							
\square The Department for Children and Families (DCF) per court order							
\square A designated runaway shelter							
Date Signature of Officer							
	Printed Name of Offi	icer		Department			