## **Reporting Center**

YOUTH DEMOGRAPHICS		
First Name:		
Middle Name:		
Last Name:		
Date of Birth:		
Race: Gender:		
Self-reported Race/Ethnicity:		
NE Student ID:		
CONTACT INFORMATION		
Address:		
City: State: Zip:		
of Residence: Primary Phone #:		
Cell Phone #:     Alternative Phone #:		
Email address:		
SCHOOL INFORMATION		
*School Enrollment (pick one):		
Enrolled/Attending       Suspended     Expelled		
<ul> <li>Home schooled</li> <li>HS Graduate/GED, no</li> <li>College Student college</li> </ul>		
<ul> <li>Drop Out</li> <li>Alternative School</li> <li>Unspecified</li> </ul>		
*School name:		
*Current Grade:		
FAMILY INFORMATION		
Family size?		
Youth Employed:     Yes     No     Eligible for Free/Reduced Lunch:     Yes     No		
Family Income (pick one):		
□ \$0-\$9,999 □ \$10,000-\$24,999 □ \$25,000-\$39,999 □ \$40,000 or over		
*Custody/Guardianship (pick one)		
□ Single Parent □ Both Parents □ Guardian		
<ul> <li>State Ward/Ward of the Tribal</li> <li>Lives on Own</li> <li>Court</li> </ul>		
Interpreter needed? youth Yes- parents Yes-youth No and parents		

If yes, what language?		
GRANT INFORMATION		
*Grant County:	Grant #:	
REFERRAL/ENROLLMENT INFO	ORMATION	
Person Referring:	*Referral Source:	
*Referral Date:	*Enrollment/Intake Date:	
Contact Person/Case Worker:		
YOUTH INFORMATION		
*Currently Placed Out of Home?	□ Yes	No
Prior Legal Violations:		
*Status at Intake (pick one):		
	Dest adjudication, pro dispesition	Dest dispesition
□ Pre-adjudication	Post-adjudication, pre-disposition	Post-disposition
Adult Court	Diversion	Not Court Involved
Shelter Type (pick one):		
Enhanced Shelter	Short-term basic	Emergency respite foster care

Additional Notes: