

Truancy Discharge

YOUTH DEMOGRAPHICS

First Name:

Middle Name:

Last Name:

Date of Birth:

DISCHARGE INFORMATION

*Discharge Date:

*Discharge Reason (pick one):

- | | | |
|--|---|---|
| <input type="checkbox"/> Youth/Parent Refused | <input type="checkbox"/> Completed Program Requirements | <input type="checkbox"/> Did not Complete Program Requirements |
| <input type="checkbox"/> Transferred Schools | <input type="checkbox"/> Transferred to GED Program | <input type="checkbox"/> Transferred to Homeschool |
| <input type="checkbox"/> Dropped Out | <input type="checkbox"/> Graduated | <input type="checkbox"/> Case Type Changed |
| <input type="checkbox"/> Referred to Higher Level of Service | <input type="checkbox"/> Other (moved away/death/etc.) | <input type="checkbox"/> City/County Attorney or school withdrew youth's referral to proram |

*Grades at Discharge: Mostly...

- A's B's C's D's F's Unknown

*School Attachment at Discharge:

- High Medium Low Unknown