



INTERSTATE COMPACT FOR JUVENILES

FORM IV

PAROLE OR PROBATION INVESTIGATION REQUEST

DATE: _____

TO: _____ (Receiving State) FROM: _____ (Sending State)

Name of Juvenile: _____ DOB: _____ Race: _____ Sex: _____

*If known, *Ht: _____ *Wt: _____ *Eye Color: _____ *Hair Color: _____
 *If available, attach photograph.

Status: _____ Sending State File #: _____

To reside with: **OR** Is residing with: _____ (Name)

Relationship: _____ Telephone: _____

Address: _____ City: _____

State: _____ Zip: _____

Reason for Adjudication/Commitment: _____

Date of Adjudication: _____ Date of Commitment: _____

Minimum Parole/Probation Expiration Date: _____ Maximum Parole/Probation Expiration Date: _____

Anticipated Placement Date : _____ Present Location: _____

We desire to transfer this juvenile on _____ to your state:
(probation/parole)

- Because his/her legal guardian resides in your state.
- For the following reasons, with your consent:

Other Comments:

- THE FOLLOWING MATERIALS ARE ENCLOSED:**
- Cover letter
 - IA/VI Application for Compact Services and Memorandum of Understanding and Waiver
 - Petition(s)
 - Order of Adjudication and Disposition
 - Legal and Social History
 - Parole/Probation Conditions (Agreement)
 - School Transcript/Records
 - Immunization Records
 - Any other Pertinent Information

FOR ICJ USE ONLY

Name: _____
(Compact Official/Designee)

Title: _____

Referred by: _____
(Name – Please Print)

Referring Agency: _____

By checking this box, I confirm the validity of the information contained within this form