STATE OF INDIANA

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COURT

In The Matter Of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A Child Alleged to be a Delinquent Child

TO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTICE OF DETENTION OF CHILD**

You, as the parent, guardian, custodian or intake officer are hereby notified that the child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (D.O.B. ), who resides at , has been placed in detention at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ police department because there is probable cause to believe that said child has committed a delinquent act, specifically .

The intake officer completed a detention screening tool and the parties will be provided with a copy of the results prior to the Detention Hearing.

Furthermore, there is reasonable belief that at least one of the following conditions (as specified in IC 31-37-5-3) exists with respect to the child:

The child is unlikely to appear before the juvenile court for subsequent proceedings;

The delinquent act involved would be murder or a Level 1 felony, Level 2 felony, Level

3 felony, or Level 4 felony, if committed by an adult;

Detention is essential to protect the child or the community;

The parent, guardian, or custodian cannot be located or is unwilling/unable to take

custody; or

The child has a reasonable basis for requesting not to be released.

*[Complete if the child is under age twelve, omit this section if over age 12]:*

\_\_\_\_\_\_ The child posses an imminent risk of harm to the community; or

\_\_\_\_\_\_ Detention is essential to protect the community and no reasonable alternatives exist to reduce the risk.

Please contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at telephone number ( )

for further information.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Detaining Officer or Intake Officer

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_