

Perry Multi County Juvenile Facility
1625 Commerce Drive
New Lexington, Ohio 43764
Phone: (740) 342-9700
Fax: (740) 342-9701

7. Age of first arrest: Years: _____ Months _____ Age of First Adjudication Years: _____ Months _____

8. Is the youth currently in counseling at the time of placement: Yes No

Where? _____ Therapist Name: _____

Was a psychological administered? Yes No *Please have copy upon admission to facility.*

9. Has the youth had prior suicide attempts? Yes No

10. Does the youth have any prior sexual assault? Victim? Yes No Please explain: _____

11. Does the youth have any gang involvement? Yes No

12. Please indicate any family involvement in the criminal justice system: _____

13. Please indicate family involvement in child protective services: _____

14. History of youth substance use/abuse: Yes No Explain: _____

15. History of family substance use/abuse: Yes No Explain: _____

16. Has the youth received treatment for substance abuse? Yes No

Where: _____ When: _____

17. If not incarcerated a drug test has been administered: Results? _____

18. Is the youth on prescription medication? Yes No

Name and dosage: _____

Reason for prescription: _____

19. Please indicate any medical issues/concerns for the youth: _____

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20 . What is the youth's school of record? _____ Current Grade Level: _____

21. Does the youth have an IEP? Yes No *For:* Behavioral Learning Disability
Please have a copy upon admission to facility

22. Does the youth have behavioral problems in school? Yes No
Please answer below to the best of your knowledge:

Suspended: _____Times Truant: _____Times Expelled: _____Times

23. Are there any contact restrictions for the youth? Yes No Explain: _____

24. Where will the youth be living following release from Perry Multi County Juvenile Facility?
