

CONFIDENTIAL  
DO NOT DISCLOSE

Youth Interview Form

1. You are being represented by the Public Defender's Office.
2. When you tell your lawyer about your case, the information is protected by an attorney-client privilege, which means your lawyer is cannot to repeat this information to unauthorized persons. It is important that you are completely truthful with your lawyer. To give you the best chance of success, it is important that your lawyer knows all the facts. Answer all questions as well as you can and be specific.
3. Do not talk to anyone except your lawyer, or persons your lawyer tells you to talk with, about your case. Do not discuss your cases with police or co-defendants.

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

Type of Case:

Status: \_\_\_\_\_

Delinquency: \_\_\_\_\_

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What is your full name?

What do you prefer to be called?

\_\_\_\_\_

\_\_\_\_\_

What is your mailing address? (where USPS delivers mail)

\_\_\_\_\_

\_\_\_\_\_

If I need to contact you, what number should I call? \_\_\_\_\_

Is there another number at which I can reach you? \_\_\_\_\_

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When is your birthday? \_\_\_\_\_

What is your

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

What is your mom's name? \_\_\_\_\_

What is your dad's name? \_\_\_\_\_

What is your mom's address/phone #, if  
different than yours? \_\_\_\_\_

What is your father's address/phone #, if  
different from yours? \_\_\_\_\_

Do your grandparents live in the area? If so, what are their names?

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Does your mom have a job? \_\_\_\_\_ If so, where and is there a phone # there? \_\_\_\_\_

Does your dad have a job? \_\_\_\_\_ If so, where and is there a phone # there? \_\_\_\_\_

Do you have brothers/sisters? \_\_\_\_\_ How many? \_\_\_\_\_

What are the names of your brothers/sisters (Put last name if different from yours)?

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What school do you attend? \_\_\_\_\_

What grade are you in? \_\_\_\_\_

Who is your favorite teacher? \_\_\_\_\_

Which subjects do you do the best in? \_\_\_\_\_

Have you ever been suspended? \_\_\_\_\_ Why? \_\_\_\_\_

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Do you play any sports at school or in your community?

Baseball \_\_\_\_\_

Basketball \_\_\_\_\_

Cheer \_\_\_\_\_

Cross country \_\_\_\_\_

Golf \_\_\_\_\_

Soccer \_\_\_\_\_

Softball \_\_\_\_\_

Swimming \_\_\_\_\_

Tennis \_\_\_\_\_

Track \_\_\_\_\_

Volleyball \_\_\_\_\_

Other \_\_\_\_\_

Do you belong to a religious group or church? \_\_\_\_\_ If so, please provide the name

\_\_\_\_\_

Do you belong to any clubs or extracurricular activities at school, church or in your community?

Band \_\_\_\_\_

Choir \_\_\_\_\_

Chorus \_\_\_\_\_

4-H \_\_\_\_\_

Scouts \_\_\_\_\_

Other \_\_\_\_\_

Have you ever been placed in a diversion program? \_\_\_\_\_

If so, what was the result? \_\_\_\_\_

Have you ever been charged with a juvenile petition before, in this or another county?

If so, what was the result \_\_\_\_\_

Do you have any medical issues that I might need to know about?

\_\_\_\_\_

**TO BE FILLED OUT BY ATTORNEY**

Psychological Evaluation? \_\_\_\_\_

Evaluator \_\_\_\_\_

Date \_\_\_\_\_

Results/recommendations \_\_\_\_\_

\_\_\_\_\_

Current Placement?

- At home \_\_\_\_\_
- Kinship \_\_\_\_\_
- Foster Care \_\_\_\_\_
- Group \_\_\_\_\_

If in foster care, what are the foster parent's names: \_\_\_\_\_

Foster parent's address: \_\_\_\_\_

\_\_\_\_\_

Notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_