

INTERVIEW SHEET OF JUVENILE CLIENT

Next Court Date: _____ Date File Opened: _____
Judge Assigned: _____ Attorney Assigned: _____

Today's Date: _____
SS#: _____
Driver's License: _____

FULL
NAME: _____
Alias: _____
DOB: _____
Age: _____ Sex: _____ Race: _____ Place of birth: _____

CURRENT ADDRESS: _____
MAILING ADDRESS(if different): _____
PHONE
NUMBERS: _____
Who live with? _____

Physical and Mental Problems and
Medications: _____

Attend School? _____ Where? _____
Grades? _____
Suspensions or Discipline
Reports: _____

Employment/ Future Plans? _____

FAMILY INFORMATION:
Father's Name and Contact Information(home and
work) _____

Mother's Name and Contact Information(home and
work) _____

Other
Family/Friends: _____ -

Social Worker: _____

Court Counselor: _____

Therapist: _____

Any other community services: _____

Date arrested/served: _____

Who served? _____

Did give an oral statement? _____

Sign a rights form? _____

Did sign any statements? _____

Was anyone else charged with you? _____

What are you charged with? _____

Does any other attorney represent you? _____

Do you have any other charges? _____

Are you now on probation? _____

Have you ever been in court before for any reason? _____

For
what? _____

**FACTUAL DETAILS OF CURRENT
CHARGES:** _____

**OTHER INFO. OR
ISSUES:** _____

Interviewer: _____ Date: _____