

Cuyahoga County Court of Common Pleas Juvenile Court Division Early Intervention & Diversion Center

DEFINITIONS

Pursuant to R.C. 2151.022, an "unruly child" is defined as:

- (A) Any child who does not submit to the reasonable control of the child's parent, teachers, guardian, or custodian, by reason of being wayward or habitually disobedient.
- (B) Any child who is a habitual truant from school and who previously has not been adjudicated an unruly child for being a habitual truant,
- (C) Any child who behaves in a manner as to injure or endanger the child's own health or morals or the health or morals of others,
- (D) Any child who violates a law, other than division (C) of section 2907.39 (being under 18 years of age and showing or giving false information to gain entrance to an adult entertainment establishment), division (A) of section 2923.211 (being under 18 years of age and purchasing or attempting to purchase a firearm), division (C)(1) or (D) of section 2925.55 (being under 18 years of age and purchasing, receiving, or otherwise acquiring a pseudoephedrine product from other than a pharmacist or as prescribed by a licensed health professional), or section 2151.87 (being under 18 years of age and possessing, using, purchasing or receiving cigarettes or other tobacco products) of the revised code, that is applicable only to a child.

INSTRUCTIONS FOR SUBMITTING AN UNRULY REFERRAL

As the parent, legal custodian, guardian or other person involved, you may submit to Juvenile Court an unruly referral with respect to a child you believe is engaging in behaviors that are in violation of the law as defined on this page.

To begin the process you must first request an appointment with Court staff by contacting one of the offices listed below. If you do not speak English you may have someone call on your behalf, during which the Court will schedule an appointment for you and your child(ren) to meet with staff, along with providing Spanish interpreter services.

Court business hours are Monday – Friday from 8:30a.m. – 4:30p.m, excluding holidays and weekends. The latest an appointment will be scheduled is 3:30p.m.

This appointment will be an opportunity to conduct an initial screening interview with you and your child(ren).

The interview with you and your child(ren) is an important and positive step that provides the Court with information that will further guide decisions relating to your child(ren). The goal is to offer support and appropriate services, as needed, for your family.

During your appointment you will also be asked to complete documents such as: (1) Juvenile Court Fact Sheet, (2) Unruly Referral Questionnaire/Statement and (3) Authorization for Release of Information. These forms must be completed in English using blue or black pen.

If you arrive at one of the offices without a pre-scheduled appointment, paperwork may be completed, but you will be asked to return on a later date, with your child(ren) to complete the screening interview prior to any services being offered. Please be certain you provide accurate and current contact information. If any of your information changes following submission of your paperwork, it is your responsibility to notify the court of the changes.

Main Office

Metzenbaum Center

Early Intervention & Diversion Center 3343 Community College Avenue Cleveland, Ohio 44115 (216) 443-3419

Branch Offices

Lakewood Office 12650 Detroit Avenue Lakewood, Ohio 44107 (216) 698-3457 **Southwest Office** 5361 Pearl Road Parma, Ohio 44129 (216) 443-5381

Southeast Office 21100 Southgate Pk. Blvd., #3 Maple Heights, Ohio 44137 (216)443-5198



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Juvenile Rule 9 states that "(A) In all appropriate cases formal action should be avoided and other community resources utilized to ameliorate situations brought to the attention of the court, (B) Information that a child is within the court's jurisdiction may be informally screened prior to the filing of a compliant to determine whether the filing of a complaint is in the best interest of the child and the public."

Juvenile Rule 10 states that "any person having knowledge of a child who appears to be a juvenile traffic offender, delinquent, unruly, neglected, dependent, or abused may file a complaint with respect to the child in the juvenile court of the county in which the child has a residence or legal settlement, or in which the traffic offense, delinquency, unruliness, neglect, dependency, or abuse occurred."

INSTRUCTIONS FOR COMPLETING THE REQUIRED FORMS

1. Juvenile Court Fact Sheet

Subject's Information:

This section pertains to the child. The child's full <u>legal name</u>, <u>address</u>, <u>date of birth</u>, <u>gender and race are mandatory fields that must be completed without exception</u>. Please remember to provide a <u>detailed</u> physical description including eye and hair color, height, weight and any distinguishing marks observed. (I.e. piercings, scars, tattoos etc...) In the "In Custody Of" field, please provide the specific relationship of the person with whom the child resides, i.e. parents, mother, father, grandmother, aunt, etc...

Mother's Information & Father's / Alleged Father's Information:

The parent information sections are for the <u>biological</u> mother and father as defined through legal marriage and/or paternity testing only. Adoptive parents are also listed in this section. If the parents were never legally married or paternity has NOT been established, check the box in front of "Alleged Father's Information". "Unknown" or "N/A" can <u>never</u> be entered in the field for mother. The names of both parents should be provided even when the full address is unknown. If a parent is deceased, the name of that person is required. Write "DECEASED" in the address line. *RACE, GENDER, and DATE OF BIRTH are mandatory requirements.

Other Person's Information:

This section pertains to individuals other than the biological or adoptive parents with whom the child is legally residing, or in whose care the child has been placed, or is a party involved, such as a legal custodian, guardian, government agency, stepparents, partners etc. In the "Relationship" field, please provide the specific relationship of the person with whom the child resides, i.e. grandmother, aunt, sibling, stepparent, etc... *RACE, GENDER, and DATE OF BIRTH are mandatory requirements.

Complainant's Information:

The person submitting this referral to the court should enter all of his or her information in this section.

If you are handwriting the information on this form please use black or blue pen only. Please fill in the information as legibly as possible. Not being able to read/understand the information you provide might significantly delay processing your referral.



Cuyahoga County Court of Common Pleas Juvenile Court Division Early Intervention & Diversion Center

DIVERSION PROGRAMS

Community Diversion Program (CDP)

Diversion Case Management Services (DCMS)

Informal Hearing/Conference

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Mediation

2. Unruly Referral Questionnaire

This questionnaire asks several basic questions about the child. To make an appropriate decision regarding processing your referral, we must know as much as possible about past and/or current court involvement, **specific details** describing how the child is behaving that lead you to conclude he or she is unruly and may require court interventions, **when the problems began**, whether there are special needs and the services, if any, that are already in place. Please provide the names and telephone numbers of any counselors, social workers, therapists, doctors, etc., who are involved. The assigned staff person who reviews your referral may be required to contact these service providers to discuss the extent and types of services you are receiving. This necessary step takes place for many reasons, one of which is an attempt to avoid a potential duplication of services.

3. Authorization for Release of Information

A signed Release of Information is requested from you in case the Court and court contracted agencies, need to communicate with other service providers as part of our decision-making process. The goal and purpose of any communication is to provide effective and coordinated services to assist your family.

All allegations of a crime other than unruly behavior should be reported to your local police department along with supporting evidence and documents.

UNRULY REFERRAL CHECKLIST

- ✓ Juvenile Court Fact Sheet MANDATORY REQUIREMENT
- ✓ Unruly Referral Questionnaire
- ✓ Authorization for Release of Information
- ✓ Other relevant information to support your case

If you have any questions about the items on this checklist please refer to the "Instructions for Submitting an Unruly Referral" and/or contact a branch office to speak with staff to assist you. Submitting incomplete paperwork to the Court may delay the processing of your case.

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UNRULY REFERRAL QUESTIONNAIRE

Please answer all of the following questions completely and to the best of your knowledge. The accuracy of the information provided will assist the court in processing this unruly referral as quickly as possible. The assigned worker will notify you of the status of this referral in person, by telephone or letter.

	Incident date time frame: Fromto				
1.	Is your child currently on probation? \square yes \square no.				
2.	Has your child ever been on probation in this or any other county? \square yes \square no.				
3.	Do you and/or your child have any pending court hearings in this or any other county? \square yes \square no.				
	If yes, what county and what kind of case? Criminal Unruly Traffic Other (Please explain)				
4.	Has your child ever appeared before a judge or magistrate in this county or any other county? yes no. If yes, what was the outcome?				
5.	Have you ever met with or spoken with Court staff to report problems you are having with your child? \square yes \square no.				
	If yes, who did you speak with? How long ago? (approximate month/year)				
6.	Are you and/or your child currently receiving any services offered in the community such a from a public agency, counseling agency, treatment center, primary physician, psychologist, psychiatrist etc.? yes no. If yes, please provide the name of the person & agency currently assisting your family, their contact phone number, how long you have been receiving services, or date services terminated.				

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I am submi	tting an unruly referra	l with respect to the follo	owing child/children:				
7.	with your family?	you have a social worker from the Division of Children & Family Services (DCFS) working th your family? yes no. If yes, what type of specific services and help are you seiving? see provide Social Worker name Phone #					
8.	8. Does your child have any diagnosed mental health issues? (i.e. ADD, ADHD, Bi-Pola yes no. yes, is your child prescribed any medications? yes no.						
9.	Does your child have a	an IEP at school? 🔲 yes	no.				
10.	Do you suspect any dr	rug or alcohol use by you	r child? 🗌 yes 🗌 no.				
11.	11. In what way is your child misbehaving? Please list the specific behaviors and what mand year the problems began? Are the problems occurring predominantly at home or a there problems at school and in the community? Have any of the problem behaviors requipolice and/or legal intervention?						
	12. Have there been any recent acts of physical violence or threats of violence among family/household members in the home?						
13.	13. What kind of discipline or strategies have you tried in an effort to improve your child's behavior?						
14.	14. Briefly share any other background information you believe is relevant. Also note any other concerns or question you may have.						
-	to share additional inf ne, sign, and date belo		e next page, otherwise please legibly write	your			
Printed nai	ne	Signature	Date				

Cuyahoga County Court of Common Pleas Juvenile Court Division Additional Information

This statement is submitted with respect to the following child/children:								
concern(s), and/or incident(s including the date, incident lo every victim and/or witness.	s) regarding the abocation, name, addr Supporting evider	ns began, describe in detail the ove-named child/children. Be a ress, telephone number, date of hace and documents relative to periodical involved should complete a	s specific as possible, pirth, race, and gender for ersonal injury and/or					
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		PLEASE PRINT:						
Signature	Date	Name						
		Address						
Department Staff Name	Date	Home Phone Number						
		Cell Phone Number	Work Number					

Optional Page Signature Printed name Date