



RED DEER YOUTH JUSTICE COMMITTEE
c/o Community Corrections
4920 - 51 St, Red Deer, AB T4N 6K8
403-340-5180

Information Sheet

YOUTH NAME	_____	PLACE	_____	DATE	_____
PARENT/GUARDIAN	_____	DOB	_____	AGE	_____
PHONE NUMBER	_____	PANEL MEMBERS NAMES:	_____		
PHONE (CELL)	_____		_____		
SIBLINGS	_____		_____		

CHARGE	_____	DATE OF OFFENCE	_____		
COURT DATE	_____	CIVIL ACTION	_____		
VICTIM ATTENDING	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____		
REMARKS	_____				

SCHOOL	_____	GRADE:	_____	LATES/ABSENCES:	_____
SUBJECTS/MARKS	_____				

CONSEQUENCES	_____	GOALS/AMBITIONS	_____		
	_____		_____		
	_____		_____		
JOB	_____	OUTSIDE INTERESTS	_____		
	_____		_____		
SANCTIONS GIVEN	_____				
