



# PLACEMENT INFORMATION/DISCHARGE FORM (PID)

TEXAS  
JUVENILE  
JUSTICE  
DEPARTMENT

## I. IDENTIFYING INFORMATION

Child's Name:

Date of Birth:

DFPS Person ID#:

County/TJJD#:

## II. CHANGE BEING REPORTED (include location, level of care, daily rate, date occurred)

(Information prior to change)

Location:

LOC

Daily  
Rate

Resource  
ID No.

Date of  
Change

Address:

City/State/Zip:

(Information after change)

Location:

LOC

Daily  
Rate

Resource  
ID No.

Date of  
Change

Address:

City/State/Zip:

If change did not occur on the same day, explain (include temporary absence information, if applicable):

## III. REASON FOR CHANGE (select the most appropriate reason)

Child returned home

Child placed with relative(s)

Child placed with sibling(s)

**\*Indicate the name & relationship of the person to whom the child was discharged:**

Completed program / achieved therapeutic goals

Child ran away

Level of Care lowered

Child placed in detention or other secure facility

Child's behavior

Level of Care raised

Facility under adverse action

Placement closed

Aged out (turned 18)

Child came back into care / reactivated

Child hospitalized

Child emancipated

Removed due to risk of abuse

Caretaker moved

Case transferred to CPS

Caregiver requested the child's removal

Child death

Child committed to TJJD

Other (explain):

Deprivation no longer exists

## IV. IV-E STATUS (complete only if placing the child on inactive status OR discharging from IV-E)

Place child on **INACTIVE** status (temporarily ineligible for Title IV-E reimbursement).

**NOTE: You MUST complete all Title IV-E reviews that become due while the child is on "inactive" status.**

**DISCHARGE** child from Title IV-E Program (no longer eligible for Title IV-E; close the Title IV-E case).

**If a child is returning to his/her home, remember to create and submit a referral in JMT**

JPD/TJJD Staff Name (print or type)

Date Completed

JPD/TJJD Staff E-Mail Address (print or type)

JPD/TJJD Staff Phone Number



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## CASE PLAN REQUIREMENTS *(To be completed only if the child is being placed in a IV-E residential facility)*

### V. CASE PLAN ISSUES

Provide a description of the current placement – *provide a physical description of the living arrangement in which the child has been placed:*

Explain how the caregiver will ensure the safety of the child while in placement?

Least Restrictive (most family-like) placement – *if the child was not placed in the least restrictive setting possible (a foster family home of 6 or fewer children), explain why:*

Close proximity – School – *if the placement is too far from the child's former school to allow the child to continue to attend the same school, explain why:*

Close proximity – Parent – *if the child was not placed within the same county as, or more than 50 miles from the parents' home, explain why:*

### APPROPRIATENESS OF PLACEMENT

*Describe the services being provided by the facility to meet the child's specific needs.*

### ADDITIONAL INFORMATION

Date family notified of move	
Method of notification	
Date family notified of changes in visitation	
Method of notification	
Date caregiver provided with updated case plan	
Date caregiver provided with updated medical and educational records	

JPD/TJJD Staff Name *(print or type)*

Date Completed

JPD/TJJD Staff E-Mail Address *(print or type)*

JPD/TJJD Staff Phone Number