JUVENILE VICTIM IMPACT STATEMENT

It is your right!

This Juvenile Victim Impact Statement (JVIS) will be used throughout the juvenile justice system (by the prosecutor, the judge, the Juvenile Probation Departments and the Texas Juvenile Justice Department) to better understand the emotional/ psychological, physical, and financial impact of the crime.

The contact information you provide in this Juvenile Victim Impact Statement is important and will be used to contact you if you wish to receive information from:

- **Juvenile Probation Departments;**
- **Texas Juvenile Justice Department (TJJD) and**
- **Board of Pardons and Paroles if the offender has a determinate sentence.**

Return the
Confidential Victim Contact Information and the
Juvenile Victim Impact Statement to the
county or district attorney's office
that is prosecuting your case.

Victim Assistance Coordinator:	
Agency:	
Address:	
City:	Zip Code:
Phone:	Fax:
E-mail:	

JUVENILE VICTIM IMPACT STATEMENT

CRIME VICTIM INFORMATION SHEET AND JUVENILE VICTIM IMPACT STATEMENT PACKET

ATENCION: Si tiene preguntas sobre este document, favor de llamar al _____ para asistencia en español.

KNOW YOUR RIGHTS IN THE JUVENILE JUSTICE PROCESS. KEEP THIS PAGE FOR YOUR RECORDS.

1. **CRIME VICTIMS' RIGHTS:** You have crime victim rights if you are a:
   - Victim,
   - Parent/Guardian of a victim, or
   - Close relative of a deceased victim.

2. **CONFIDENTIAL INFORMATION SHEET:**
   - Used by juvenile justice professionals to contact you throughout the process.
   - Used to elect and exercise your rights to notification of court proceedings, probation, parole and release.
   - Used by the Texas Juvenile Justice Department (TJJD) to add you to their database if you request to receive notification of changes in the offender/respondent's status if he or she is committed to a TJJD facility.

You must notify your Victim Assistance Coordinator if any of your contact information changes to make sure you are kept informed.

After the offender/respondent is adjudicated and placed on juvenile probation or sent to a Texas Juvenile Justice Department (TJJD) facility, notify the Victim Assistance Coordinator in your county _____ of any new contact information. If your offender/respondent is committed to TJJD notify TJJD Victim Services toll free at 888-850-7369.

3. **JUVENILE VICTIM IMPACT STATEMENT:** Victims have the right to submit a Juvenile Victim Impact Statement. The Juvenile Victim Impact Statement is a written, detailed account of the emotional, physical, psychological, and financial impact the crime has had on the victim and family members. This document can be used to explain your feelings such as loss, frustration, and fear. Only you can provide this vital information.

HOW YOUR JUVENILE VICTIM IMPACT STATEMENT IS USED:

Prosecutor:
- Considers your Juvenile Victim Impact Statement before entering into a plea arrangement.
- Considers your Juvenile Victim Impact Statement to determine the restitution amount (if requested).

Judge:
- Considers your Juvenile Victim Impact Statement before imposing a sentence; however, the Juvenile Victim Impact Statement is not considered by a jury.
- Considers your Juvenile Victim Impact Statement before accepting a plea.

Your Juvenile Victim Impact Statement, excluding Section 2 of the Confidential Information Sheet can be seen by the offender/respondent and his attorney. The offender/respondent or his attorney may comment on the Juvenile Victim Impact Statement and, with approval of the court, introduce evidence or testimony in regards to its accuracy.

Juvenile Probation:
- Juvenile Probation officers have access to your Juvenile Victim Impact Statement so they can notify you if the defendant is placed on probation.

Texas Juvenile Justice Department:
- If the offender/respondent is committed to TJJD, your Juvenile Victim Impact Statement goes to the TJJD Victims' Services Division to provide you with information regarding the offender/respondent. You can register for this service by completing and signing the "Confidential Information Sheet," which is a part of the attached Juvenile Victim Impact Statement.

- Your Juvenile Victim Impact Statement will be considered prior to the release of the offender/respondent back into the community.

For additional information visit the Texas Crime Victim Clearinghouse website at: www.tdcj.state.tx.us/victim/victim-clearinghs.htm

Sec. 57.002. VICTIM'S RIGHTS. (a) A victim, guardian of a victim, or close relative of a deceased victim is entitled to the following rights within the juvenile justice system:

(1) the right to receive from law enforcement agencies adequate protection from harm and threats of harm arising from cooperation with prosecution efforts;

(2) the right to have the court or person appointed by the court take the safety of the victim or the victim's family into consideration as an element in determining whether the child should be detained before the child's conduct is adjudicated;

(3) the right, if requested, to be informed of relevant court proceedings, including appellate proceedings, and to be informed in a timely manner if those court proceedings have been canceled or rescheduled;

(4) the right to be informed, when requested, by the court or a person appointed by the court concerning the procedures in the juvenile justice system, including general procedures relating to:

(A) the preliminary investigation and deferred prosecution of a case; and

(B) the appeal of the case;

(5) the right to provide pertinent information to a juvenile court conducting a disposition hearing concerning the impact of the offense on the victim and the victim's family by testimony, written statement, or any other manner before the court renders its disposition;

(6) the right to receive information regarding compensation to victims as provided by Subchapter B, Chapter 56, Code of Criminal Procedure, including information related to the costs that may be compensated under that subchapter and the amount of compensation, eligibility for compensation, and procedures for application for compensation under that subchapter, the payment of medical expenses under Section 56.06, Code of Criminal Procedure, for a victim of a sexual assault, and when requested, to referral to available social service agencies that may offer additional assistance;

(7) the right to be informed, upon request, of procedures for release under supervision or transfer of the person to the custody of the pardons and paroles division of the Texas Department of Criminal Justice for parole, to participate in the release or transfer for parole process, to be notified, if requested, of the person's release, escape, or transfer for parole proceedings concerning the person, to provide to the Texas Juvenile Justice Department for inclusion in the person's file information to be considered by the department before the release under supervision or transfer for parole of the person, and to be notified, if requested, of the person's release or transfer for parole;

(8) the right to be provided with a waiting area, separate or secure from other witnesses, including the child alleged to have committed the conduct and relatives of the child, before testifying in any proceeding concerning the child, or, if a separate waiting area is not available, other safeguards should be taken to minimize the victim's contact with the child and the child's relatives and witnesses, before and during court proceedings;

(9) the right to prompt return of any property of the victim that is held by a law enforcement agency or the attorney for the state as evidence when the property is no longer required for that purpose;

(10) the right to have the attorney for the state notify the employer of the victim, if requested, of the necessity of the victim's cooperation and testimony in a proceeding that may necessitate the absence of the victim from work for good cause;

(11) the right to be present at all public court proceedings related to the conduct of the child as provided by Section 54.08, subject to that section; and

(12) any other right appropriate to the victim that a victim of criminal conduct has under Article 56.02, Code of Criminal Procedure.

(b) In notifying a victim of the release or escape of a person, the Texas Juvenile Justice Department shall use the same procedure established for the notification of the release or escape of an adult offender under Article 56.11, Code of Criminal Procedure.

JUVENILE VICTIM CONTACT INFORMATION

CONFIDENTIAL INFORMATION SHEET

RETURN THIS DOCUMENT TO YOUR VICTIM ASSISTANCE COORDINATOR

OFFENSE INFORMATION. TO BE COMPLETED BY THE VICTIM ASSISTANCE COORDINATOR.

OFFENSE:				OFFENSE		
	LAST NAME	FIRST NAME	MI	DOB	CAUSE/CASE #	COURT #
☐ Offender						
☐ Offender						
☐ Offender						
PID/TJJD #:		DPS STATE ID (SID) #:		COUNTY:		

This Confidential Information Sheet will be used by juvenile justice professionals to contact you throughout the process.

SECTIONS 1 & 2. TO BE COMPLETED BY THE VICTIM, PARENT/GUARDIAN OR CLOSE RELATIVE OF THE VICTIM.

SECTION 1. *NOTIFICATION.*

Do you want to be notified about relevant court proceedings?	☐ **YES**	☐ **NO**
If the offender/respondent is placed on juvenile probation, do you want to be notified of relevant actions & court proceedings?	☐ **YES**	☐ **NO**
If the offender/respondent is committed to the Texas Juvenile Justice Department (TJJD), do you want to be notified if he/she is being considered for parole, release, or discharge?	☐ **YES**	☐ **NO**
If the offender/respondent is adjudicated and placed on juvenile probation or committed to a TJJD facility, do you want communication with the offender restricted?	☐ **YES**	☐ **NO**

IMPORTANT!

IF YOU MOVE OR CHANGE ANY OF YOUR CONTACT INFORMATION, CALL YOUR VICTIM ASSISTANCE COORDINATOR OR THE TEXAS DEPARTMENT OF CRIMINAL JUSTICE VICTIM SERVICES DIVISION AT 800-848-4284.

SECTION 2. *CONFIDENTIAL INFORMATION* (Please use black ink and print clearly)

Victim's Name:	Victim Deceased: ☐ YES ☐ NO
Date of Birth:	☐ Male ☐ Female

Name of Person Submitting this Statement:		
Address:		Date of Birth:
City:	State:	Zip:
Home Phone:	Work Phone:	Cell:
Email Address:		Relationship to Victim:

Please provide the contact information of someone not living with you who will know how to contact you.		
Full Name:		
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	Cell:
Email Address:		Relationship to Victim:

Signature:_____ Date:_____

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OFFENSE INFORMATION. TO BE COMPLETED BY THE VICTIM ASSISTANCE COORDINATOR.

OFFENSE:					OFFENSE	
	LAST NAME	FIRST NAME	MI	DOB	CAUSE/PETITION #	COURT #
☐ Offender						
☐ Offender						
☐ Offender						
PID/TJJD #:		DPS STATE ID (SID) #:			COUNTY:	

Victim Assistance Coordinator:	
Agency:	Received:
Address:	
City:	Zip Code:
Phone:	Fax:
E-mail:	

JUVENILE VICTIM IMPACT INFORMATION. TO BE COMPLETED BY THE VICTIM, PARENT/GUARDIAN OR CLOSE RELATIVE OF THE VICTIM. Please give any other information you believe is important about the effect of this crime on you and your family. ***Please do not relate any information about the crime itself as those facts are already available in other reports.***

The information in this statement will show the impact the crime has on the victim, the parents, guardians or close relatives of the victim or other family members of the victim. It may be used at each phase of the criminal justice process: from the prosecution of the offense; to placement on juvenile probation; to commitment to the Texas Juvenile Justice Department; and through the release review process. Please answer only as many questions as you wish. If you need more space, an additional page may be attached to this Juvenile Victim Impact Statement.

Victim's Name:

EMOTIONAL/PSYCHOLOGICAL IMPACT. Use this section to discuss your feelings about what has happened to you as a result of the crime and how it has affected your general well-being. Please check all the reactions you have experienced.

- ☐ Loss of sleep
- ☐ Nightmares
- ☐ No trust in anyone
- ☐ Serious change in appetite
- ☐ Depression
- ☐ Marital/Relationship problems
- ☐ Lack of concentration
- ☐ Fear of being alone
- ☐ Anxiety
- ☐ Job stress
- ☐ Want to be alone
- ☐ Fear of strangers
- ☐ Anger
- ☐ Cry more easily
- ☐ Family not as close
- ☐ School stress
- ☐ Loss of security/control
- ☐ Feelings of helplessness
- ☐ Fear of leaving home
- ☐ Other _____ _____

Has the victim or the victim's family sought counseling as a result of the crime? ☐ Yes ☐ No

How has this crime affected you, your family or those close to you? Please feel free to discuss your feelings, thoughts and general well-being. (Please attach additional page if used.)

_____

_____

PHYSICAL INJURY. Use this section to discuss any physical injuries suffered as a result of this crime. You may want to write about the extent of the injuries and how long the injuries lasted. (Please attach additional page if used.)

_____

_____

_____

☐ Treated at _____ Medical Center

☐ Hospitalized at _____ for ____ days

FINANCIAL LOSS. Use this section to record the extent of financial loss as a result of this crime. You may want to keep a log of your financial loss as soon as possible after the crime occurred. In the event of an adjudication, this information **may** be used later by the judge to determine if any restitution may be ordered.

Estimate of Financial Loss	**Cost to Date**	**Future Expected Costs**
Medical/Dental expenses	$	$
Property loss or damage	$	$
Loss of income from work	$	$
Counseling expenses	$	$
Emergency transportation	$	$
Crime scene cleanup	$	$
Moving expenses	$	$
Funeral expenses (If applicable)	$	$
Other (Please explain)	$	$

Were any expenses covered by insurance or other sources? ☐ Yes ☐ No

Are copies attached? If available, please attach copies of receipts, bills, and canceled checks. ☐ Yes ☐ No

Have you applied for Crime Victims' Compensation through the Attorney General's Office? ☐ Yes ☐ No

If you have not, you may apply at www.texasattorneygeneral.gov or call 1-800-983-9933.

The information in this Juvenile Victim Impact Statement is true and correct to the best of my knowledge.

_____
Print Name

_____ _____
Signature Date

Information submitted by: ☐ Victim ☐ Parent/Guardian ☐ Close Relative ☐ Other _____