

# Inter-County Transfer of Probation Supervision Child and Family Identifying Information

This form contains identifying information required to accompany an initial request for interim supervision pursuant to Section 51.072 (e) of the Texas Family Code. It should be transmitted by the Sending County along with an email requesting interim supervision when a child moves or intends to move to and reside in the Receiving County for a period of at least 60 days. Please fill out this form in its entirety and email the request for interim supervision and the completed form as an attachment to the designated Inter-County Transfer Officer (ICTO) in the Receiving County. A comprehensive list of ICT Officers can be accessed at the Texas Juvenile Probation Commission website at [www.tjpc.state.tx.us](http://www.tjpc.state.tx.us).

## SENDING COUNTY INFORMATION

Name of Requestor:	Title: <input type="checkbox"/> Inter-County Transfer Officer <input type="checkbox"/> Chief Juvenile Probation Officer		
E-Mail Address:	Telephone: (    )	Fax: (    )	Date Request Sent:

## RECEIVING COUNTY INFORMATION

Name of Recipient:	Title: <input type="checkbox"/> Inter-County Transfer Officer <input type="checkbox"/> Chief Juvenile Probation Officer		
E-Mail Address:	Telephone: (    )	Fax: (    )	

## CHILD'S INFORMATION

Name of Child:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth:	Age:	Race:
Offense(s) for Which Child is Currently on Probation:		Current Probation Term: From                      To		
Is Child Currently Residing in Receiving County? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Child First Resided in Receiving County:	Projected Date Child Will First Reside in Receiving County:	

Referral History Summary:		
Offense:	Date:	Disposition:

Statement of Special Needs: <input type="checkbox"/> Mental Health <input type="checkbox"/> Mental Retardation <input type="checkbox"/> Education <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Sex Offender <input type="checkbox"/> Other Explain	Reason for Moving to Receiving County: <input type="checkbox"/> Change in Employment <input type="checkbox"/> Child Custody Change <input type="checkbox"/> Family Circumstances <input type="checkbox"/> Live with Relative <input type="checkbox"/> Other Explain	School Name:  School Telephone: (    )  Other Important Information:
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## PARENT OR OTHER ELIGIBLE PERSON'S INFORMATION

Name of Person With Whom Child Will Reside:	Social Security Number:	Driver's License Number:	Date of Birth:
Relationship of Person With Whom Child Will Reside: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Relative (not a parent) Relationship <input type="checkbox"/> Custodian <input type="checkbox"/> Other Relationship	Address of Residence in Receiving County:		Telephone Number: (If available)
	City:	County:	State:      Zip Code:

## SUPERVISION TRANSFER AUTHORIZATION OR REFUSAL (Receiving County Use Only)

<input type="checkbox"/> Accepted <input type="checkbox"/> Refused (If Refused, check reason) <input type="checkbox"/> Residential Placement <input type="checkbox"/> DFPS Foster Care Placement	Remarks:
Signature of Receiving County ICTO or Chief Juvenile Probation Officer:	Date Signed:      Date Emailed to Sending County:

CONFIDENTIALITY NOTICE: Information relating to juvenile offenders, their files, court proceedings or other records is considered confidential under Section 58.005 of the Texas Family Code and may not be disseminated to the public. Access is specifically restricted to individuals or entities authorized by statute or court order.