



OFFICE OF YOUTH COMMUNITY & RESTORATION
2026 STATUS OFFENDER AND NON OFFENDER DETENTION REPORT

SEND IN A SEPARATE REPORT FOR EACH STATUS OFFENDER OR NON OFFENDER HELD IN DETENTION
 SUBMIT REPORT BY THE 10TH OF THE MONTH FOLLOWING STATUS OFFENDER'S OR NON OFFENDER'S RELEASE.

SECTION A. Facility Information

Facility Name:	
County:	

SECTION B. Youth Information

Youth's Name:	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Youth's County ID#:
Intake Date (mm/dd/yy):	Intake Time (Please indicate if this time is AM or PM):	
Detention Hearing Date (mm/dd/yy): <i>Indicate N/A if not applicable.</i>	Detention Hearing Time: <i>(Please indicate if this time is AM or PM)</i>	
Release Date (mm/dd/yy):	Release Time (Please indicate if this time is AM or PM):	
TOTAL TIME IN SECURE DETENTION:		
Less than 24 Hours <input type="checkbox"/>		24 Hours or More <input type="checkbox"/>

SECTION C. Offense Information

Please Check Reason for Detention Below Indicate Pre- or Post-Disposition at Right	Disposition (CHECK ONLY ONE)	
	Pre- Disposition	Post- Disposition
<input type="checkbox"/> Runaway Indicate Residency: <input type="checkbox"/> CA Resident <input type="checkbox"/> Out-of-State Resident (<i>Interstate Compact Filed? YES <input type="checkbox"/> NO <input type="checkbox"/></i>)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Truancy	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Curfew	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Beyond Control of Parents	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Possession of Alcohol - B&P Code 25662(a)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Bench Warrant	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Committed to Juvenile Hall (<i>Found in Contempt of Court</i>) Court Date Court Time	N/A	<input type="checkbox"/>
**Attach a copy of the Minute Order specifying terms AND the Valid Court Order Checklist. Please submit separate form for each admission if youth is committed to several weekends.		
Non Offender (indicate below which type of hold applies):		
<input type="checkbox"/> WIC §300 Dependent / <input type="checkbox"/> Material Witness		

SECTION D. Reporting Information

Name and Title of Reporting Person:	Phone:	Date:
	E-Mail:	
Name and Title of Facility Manager:	Phone:	Date:
	E-Mail:	

Submit completed form:

This form may be downloaded at
<https://oycr.ca.gov/status-offender-and-federal-youth/>
Questions: Contact the FSO Compliance Monitoring Analyst at
OYCRCompliance.Monitor@chhs.ca.gov or (916)651-0423

NOTICE TO REPORTERS: As of July 1, 2024, the Office of Youth and Community Restoration (OYCR) assumed responsibility for Compliance Monitoring of JH facilities. All forms and surveys must be submitted to OYCR after July 1, 2024. For updates and information please visit our website.