



DIVERSION EXTENSION VERIFICATION

TEXAS
JUVENILE
JUSTICE
DEPARTMENT

Fill out the information below to request reimbursement for a diversion extension for a youth's placement or transition plan. Send the completed form to RegionalizationApplications@tjtd.texas.gov.

- ☒ Check here if this form is being used to request an extension of a placement/service/program in progress. (Complete sections I, II, and III.)
☐ Check here if this form is being used to request an extension of an aftercare service in progress. (Complete sections I and III.)

I. YOUTH OVERVIEW.

Youth's Name	County Where Youth Was Adjudicated	Youth's Date of Birth	Diversion Application Number
PID#: 22976	Collin	3/4/02	17-DO271

II. PLACEMENT/SERVICE/PROGRAM TO BE EXTENDED

Placement/Service/Program	Length of Extension	Daily Rate of Placement	Total Amount for Placement Extension
G4S-Oaks	90 days	\$162.30	\$14,607

III. AFTERCARE SERVICES TO BE EXTENDED

Service/Program	Length of Aftercare Extension	Rate for Aftercare Treatment	Daily Rate or Flat Rate?	Total Amount for Aftercare Extension

☐ Requesting no extension in aftercare services

If your department receives reimbursement funds from TJJD that for any reason are not used to pay for the above placement/aftercare treatment, those funds must be returned to TJJD.

SIGNATURE OF CHIEF JUVENILE PROBATION OFFICER

Name	Signature	Date
H. Lynn Hadnot	X	2-1-18

SIGNATURE OF SENIOR DIRECTOR OF PROBATION AND COMMUNITY SERVICES

- ☒ Expenses approved for amounts noted above
☐ Expenses not approved
☐ Expenses approved, with the following changes to the amounts noted above:

Name	Signature	Date
Vanessa Serrano	X	02/01/18