



TJJD Regional Diversion Application

TEXAS
JUVENILE
JUSTICE
DEPARTMENT

[Instructions for completing this form are available on the TJJD website](#)

I. YOUTH OVERVIEW			
Youth's Name (Last, First, Middle Initial)	Department Submitting Application	Youth's Next Disposition Court Date	
██████████	Collin County Juvenile Probation	1/31/23	
Youth's Date of Birth (MM/DD/YYYY)	Youth's Full PID Number	Youth's IQ	Youth's ACE Score
03/17/2006	0430026584	95	2

II. RISK AND NEEDS ASSESSMENT	
Name of Risk and Needs Assessment Tool Used	
PACT Full Screen	
Risk Assessment	Needs Assessment
High <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Low <input type="checkbox"/>	High <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> Low <input type="checkbox"/>

III. PRIOR MISDEMEANOR REFERRALS AND ADJUDICATIONS			
Date	Offense	Disposition	Outcome
2/17/21	Evading Arrest Detention	Adjudicated with Placement	Motion to Modify Filed
3/13/19	Theft Property \$100-\$750	Deferred Prosecution	Completed

IV. PRIOR FELONY REFERRALS AND ADJUDICATIONS			
Date	Offense	Disposition	Outcome
9/9/22	Deadly Conduct Discharge Firearm	Pending	
1/20/21	Evading Arrest Detention with Vehicle	Adjudicated with Placement	Motion to Modify Filed
1/20/21	Theft Property \$2500-\$30K	Adjudicated with Placement	Motion to Modify Filed
1/20/21	Theft Property \$2500-\$30K	Taken into consideration	

V. FELONY THAT WOULD HAVE RESULTED IN A RECOMMENDATION FOR COMMITMENT TO TJJD			
Date	Offense	Disposition	Outcome
9/9/22	Deadly Conduct Discharge of Firearm	Pending	
Felony Level: <input type="checkbox"/> 1 st Degree/Capital <input checked="" type="checkbox"/> 3 rd Degree <input type="checkbox"/> 2 nd Degree <input type="checkbox"/> State Jail		Presence of: Felony Sex Offense: <input type="checkbox"/> Yes <input type="checkbox"/> No Felony against Person*: <input type="checkbox"/> Yes <input type="checkbox"/> No Weapon or Firearm: <input type="checkbox"/> Yes <input type="checkbox"/> No * See TJJD-REG-0071 for a list of offenses against person	
Is an original petition alleging delinquent conduct or a motion to modify filed with the court?			
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			

VI. In order for the youth to qualify for the Regionalization Diversion program, the juvenile probation department must demonstrate a prior effort to provide appropriate interventions with priority given to the treatment needs of the youth. Intervention should be commensurate with county resources.
Did the juvenile probation department provide appropriate interventions with priority given to the treatment needs of the youth?
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no, why?
<input type="checkbox"/> No funding available <input type="checkbox"/> Other, please specify:
<input type="checkbox"/> Local placements/programs/services not available to meet the youth's needs

VII. PRIOR INTERVENTIONS
Please include all relevant information regarding prior interventions and/or modifications: The juvenile completed Deferred Prosecution on July 13, 2020. He was then placed on Sanction Guideline Level 5 Probation on April 27, 2021 and placed in the Collin County Juvenile Detention Center Post Adjudication Program. He completed placement on May 17, 2022.



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He was then supervised in the community on Intensive Supervision followed by Standard Probation until being detained for the alleged offense of Deadly Conduct Discharge of Firearm. He is currently in short-term detention.

VIII. SUPPORTING DOCUMENTATION SUBMITTED WITH THIS APPLICATION

Psychological Evaluation Interagency Application for Placement Risk and Needs Assessment Other

IX. JUVENILE PROBATION DEPARTMENT REQUEST FOR ASSISTANCE

Please indicate what type of assistance the juvenile probation department is requesting for the youth, including a recommendation for what type of treatment or intervention is needed and the needs to be addressed.

Services to meet his substance abuse needs and his anti-social behavior would be beneficial.

X. PROPOSED PLACEMENT/SERVICE/PROGRAM

If more than one, please list in order of preference.

Placement/Service/Program	Estimated Length of Service	Cost Per Day (Estimated)	Has Youth Been Accepted into This Placement/Program/Service?	
Lake Granbury Youth Services	9 months	\$255.00	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>

CERTIFICATION

I certify that, if not for the Regionalization Diversion program, the disposition recommendation would be commitment to TJJD.

Name of Chief Juvenile Probation Officer H. Lynn Hadnot	Signature of Chief Juvenile Probation Officer or Designee X	Date 01-19-23
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TJJD has five workdays to respond to a juvenile probation department's request. TJJD will make reasonable efforts to expedite responses upon request.

The chief juvenile probation officer must sign the form before it is submitted to TJJD.
Scan and email a copy of the form to RegionalizationApplications@tjtd.texas.gov.