

**CALIFORNIA BOARD OF STATE AND COMMUNITY CORRECTIONS  
2014 FEDERAL YOUTH DETENTION REPORT**

- When a youth is held in a secure juvenile detention facility **solely for a federal detention hold (e.g., illegal entry)<sup>1</sup>**, administrators are required to report the name of that individual and their length of stay to the Board of State and Community Corrections (BSCC).
- Please submit this form to the BSCC by the 10<sup>th</sup> of the month if any youth were held for the federal government and released during the preceding month. **Submit the report after the youth has been released.**
- A separate form must be completed for **each youth** detained for the federal government.

**SECTION A.**

<b>Name of facility:</b>	<b>County:</b>
<b>Type of facility (please check one):</b>	
<input type="checkbox"/> Juvenile Hall	<input type="checkbox"/> Special Purpose Juvenile Hall
<input type="checkbox"/> Camp	

**SECTION B.**

<b>Youth's Name:</b>	<b>Gender:</b> <input type="checkbox"/> M <input type="checkbox"/> F	<b>County ID#:</b>
<b>Intake Date (m/d/yy):</b>	<b>Intake Time (Please indicate if time is AM or PM):</b>	
<b>Court-Ordered Release Date:</b> <i>(If youth also had criminal charges)</i>		
<b>Date ICE Notified of scheduled release date:</b>		
<b>Actual Release Date (m/d/yy):</b>	<b>Release Time (Please indicate if time is AM or PM):</b>	

**SECTION C.**

<b>Reason and length of stay for detention:</b>	
<b>Federal Government Hold</b>	<b>Pursuant to Contract?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
1. <input type="checkbox"/> Youth was held <b>solely</b> for illegal entry or as a material witness and subsequently deported.	
<input type="checkbox"/> Less than 24 hours	<input type="checkbox"/> More than 24 hours - _____ days detained.
2. <input type="checkbox"/> Youth was held for illegal entry <b>AND</b> had criminal charges pending or was committed on criminal charges. <b><u>Count ONLY the time from court ordered release date until youth is released to ICE.</u></b>	
<input type="checkbox"/> Less than 24 hours	<input type="checkbox"/> More than 24 hours - _____ days detained.

**SECTION D.**

<b>Name <u>and</u> Title of Reporting Person:</b>	Phone:	Date:
	E-Mail:	
<b>Name <u>and</u> Title of Facility Manager:</b>	Phone:	Date:
	E-Mail:	

Submit completed report **by email:**  
**by fax:**  
**by mail:**

[analyst@bscc.ca.gov](mailto:analyst@bscc.ca.gov)  
(916) 322-2461 or (916) 327-3317  
Board of State and Community Corrections  
ATTN: FSO Report Analyst  
600 Bercut Drive, Sacramento, CA 95811  
(916) 323-9704

**Questions?**

This form may be downloaded at:

<http://www.bscc.ca.gov/programs-and-services/fso/services>

<sup>1</sup> Do not include youth who have a federal detention hold and are charged according to WIC §602; the JJDPA Act of 2002 requires the BSCC to monitor only those youth held solely for a federal detention hold for illegal entry.