



CALIFORNIA BOARD OF STATE AND COMMUNITY CORRECTIONS
2024 FEDERAL YOUTH DETENTION REPORT INSTRUCTIONS

SECTION A.

Name of Facility: Enter the name of your juvenile detention facility.

County: Enter the name of your county.

Type of Facility: Check the box that applies to your facility type.

SECTION B.

Name of Youth: Enter the name of the detained juvenile.

Gender: Check appropriate box (male/female).

Time of intake: Fill in the hour (indicate whether this time is AM or PM), month, day, and year that the juvenile was booked into your facility.

Court-Ordered Release Date: Enter this date ONLY if the youth ALSO had criminal charges; enter the scheduled release date. This date may coincide with the date ICE was notified for pickup. **Do not enter a date in this area if the youth was held ONLY for illegal entry or as a material witness.**

Date ICE Notified of Scheduled Release Date: Indicate the date that you notified ICE of scheduled release. DO NOT enter the date ICE was notified of the youth's undocumented status.

Actual Release Date: Fill in the hour (indicate whether this time is AM or PM), month, day, and year of the youth's ACTUAL release from the facility.

SECTION C.

Reason for Hold: Check the appropriate box for the reason the youth was held.

Indicate if the federal hold was pursuant to an existing contract with the federal government or not.

1. Check this box if the youth was held **solely for illegal entry or as a material witness** and was subsequently deported. *DO NOT include youth who were also charged with a criminal offense.*
2. Check this box if the youth was held for illegal entry and **was also charged with a criminal offense. Indicate the time that the youth spent in the facility after the COURT ORDERED RELEASE DATE until their actual release from the facility. Do not count the entire time spent in the facility.** The JJDPa only includes such youth during the time when they are held solely due to a federal hold, not during the time when criminal charges are pending, or during a commitment for a criminal charge. *Please contact the FSO Compliance Monitoring Analyst at analyst@bscc.ca.gov or (916) 323-8621 if you have questions about this section.*

Number of Hours Youth was Held: Check the appropriate box (left of selections) for time period that the youth was held in your facility **as a federal detainee only.** *If the youth was held over 24 hours, please indicate the number of days they were held in the space provided.*

SECTION D.

Print both names, titles, date, telephone numbers, and e-mail addresses for both the reporting person **and** the Facility Manager.