



**YOUTH INVESTIGATIONS DIVISION**  
**Criminal Trespass to Vehicle (CTTV) Workshop Juvenile Intervention Program**  
**CTTV WORKSHOP PARENT/GUARDIAN NOTIFICATION CALL LOG**

**Instructions:** To be prepared by the sworn member assigned to the Area Front Desk and/or the CTTV Workshop presenters when it is necessary to make a notification to the parent/guardian of a juvenile scheduled to attend a workshop session. "Contact Reasons" include: "Failed to Attend," "Arrived Late/After Start," "Left Prior to Dismissal," or the juvenile was involved in an incident requiring notification to a parent/guardian.

TODAY'S SESSION DATE: _____ [Next Session Date: _____]					Contact Results			
Juvenile's Name (Last, First)	Juvenile's CB#	Contact Reason	Parent/Guardian Name (Last, First)	Contact Phone Number	[If contact "yes," indicate whether or not the parent/guardian was notified to have the youth attend on the next workshop session date.]			
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>
					Call Time:	Contact Yes <input type="checkbox"/>	Notified Yes <input type="checkbox"/>	New Date No <input type="checkbox"/>

**Note:** If more than ten notifications attempted/made, check this box:  and attach an additional call log. This Call Log is Log \_\_\_\_\_ of \_\_\_\_\_ Logs.

**Preparing Member (Name):** \_\_\_\_\_ **Star:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_

**CTTV Supervisor:** \_\_\_\_\_ **Star:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Approved:** \_\_\_\_\_