



Downtown
525 N. Main, Ste 235
Wichita, KS 67203

Office of the District Attorney
18th Judicial District

Juvenile
1900 E. Morris
Wichita, KS 67211

MONTHLY REPORT

Name:

Address:

Phone number:

Who do you live with?

Name and relationship (spouse, parent, friend, etc)

Is this a new address or telephone number? Yes No

Present School:

Present school activities you are involved in:

Indicate any special school awards or commendations you have received:

If your grades are low, what efforts are you taking to improve, i.e. tutoring, teacher aides, etc. Please explain:

Explain any disciplinary problems or suspensions you have had during this period:

Present Employer:

Address:

Job description/job duty title:

Wages per hour, day week or month

| Hours per week:

Indicate any special work awards or commendations you have received:

Are you having any problems at work: Yes No

If yes, please explain:

Miscellaneous Activities:

Indicate any outside activities you are currently involved in:

Are you planning any trips, vacation, etc which will take you out of town? Explain:

List any counseling or treatment attended during this time period. **Please list type of treatment, name of facility, counselor's name and dates attended:**

Law Enforcement Contact:

Have you been arrested or had any contact with a law enforcement official since your last report?

Yes No

If yes, explain:

If there is anything you have questions regarding your diversion, indicate below:

Which form do you need more of? Check all that apply Report Forms Community Service Forms

Date:

Applicant Signature

Parents Signature:

Parents Signature

GRADES: Teacher's signature required

1st hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

2nd hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

3rd hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

4th hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

5th hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

6th hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

7th hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

8th hour Subject: Anticipated Grade: Absences:
Teacher's comments/concerns:

Teacher's Signature

**This report is to be filled out, signed and sent to:
Pre-Trial Diversion Program, District Attorney's Office, Juvenile Division, 1900 E. Morris, Wichita,
Kansas 67211.**