



Instructions for Completing Intake Paperwork

Thank you for contacting Justice for Children. Justice for Children (JFC) is a national nonprofit organization committed to advocating for children who are victims of criminal abuse, yet are failed by the governmental systems designed to protect them. More information about our organization is available at our website, www.jfcadvocacy.org. We encourage you to familiarize yourself with our organization before completing these forms.

Our area of advocacy is very specialized. When determining whether JFC is the right agency for the child's situation, please consider the following:

- JFC does not investigate abuse/neglect or locate missing persons. Our clients are *children who have already been deemed victims of abuse by the appropriate authorities* yet still remain unprotected from their abusers.
- JFC only intervenes in cases of criminal child abuse.
- JFC intervenes in custody/visitation disputes only when the children involved are *documented* victims of criminal child abuse. JFC advocates **ONLY** for the best interests of the child, never explicitly for custody to be granted to a particular party.
- In order for a case to be considered by JFC, we must be in possession of supporting documentation of the abuse/neglect from law enforcement, medical or mental health personnel, or the state agency responsible for the protection of children. As a third party, JFC does not have the authority to obtain any of this documentation, it must be provided to us at intake.

Exceptions cannot be made to the above criterion. If you are unsure as to whether or not JFC will be able to assist the child's current circumstance, please call us at 1-800-733-0059.

The enclosed forms are necessary and must be received in completion in order for JFC to open a case. The most important portion of the information you provide to JFC is your supporting documentation. Without it, our caseworkers cannot proceed to advocate for the children involved. Examples of supporting documentation include:

- Final reports from completed investigations by a protective agency that validate/confirm/found/substantiate that criminal child abuse has occurred.
- Police reports indicating that a child has been abused.
- Medical reports where the doctor states that the injuries sustained by the victim are consistent with abuse.
- Documents from a therapist/counselor/psychologist/psychiatrist that confirms that a child has made disclosures of abuse.
- Court testimony where either a victim or alleged perpetrator has testified under oath that criminal child abuse has taken place.

Any information or documents that do not specifically document criminal child abuse will be discarded. Examples of these types of documents include: receipts of bought merchandise, copies of checks for services rendered on behalf of the child, arrest reports not pertaining to incidences of violence, videotapes/audio tapes/photographs not completed by a professional investigating the abuse allegations, letters/journals/drawings not part of a therapist report, and court documents not directly pertaining to the abuse allegations. Enclosure of these documents will slow our caseworkers in reviewing the relevant

information and detract from their overall ability to provide expedient services for the children involved.
PLEASE DO NOT SEND JFC YOUR SOLE ORIGINALS OF ANY DOCUMENTATION.

If, after reading these instructions, you believe you have a JFC case, please return this completed intake packet to:

Justice for Children
2600 Southwest Freeway, Suite 806
Houston, TX 77098

Our caseworkers ask for ten (10) working days to review your information before contacting you. Incomplete intake packets, including **those returned without a notarized release of liability and/or supporting documentation, WILL NOT be reviewed.** Upon receipt of your completed intake, a JFC caseworker will notify you within ten working days of an intake decision. Please do not hesitate to call if you have any questions regarding the enclosed forms.

ALLEGED PERPETRATOR INFORMATION:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Perpetrator's Relationship to Children: _____

Custody Status: Full Custody Joint-Custody Unsupervised Visitation

Supervised Visitation Other Arrangement: _____ None

Does the perpetrator have legal representation: In the past Presently Never

Has the perpetrator had a psychological evaluation? Yes No

Has the perpetrator previously faced charges of criminal violence? Yes No

Has the perpetrator previously been accused of child abuse? Yes No

****If you answered "yes" to any of the previous 3 questions, please provide us with supporting documentation if it is available to you.****

COURT INFORMATION:

Does the child, or children, have an ad litem? Yes No

****An ad litem (guardian ad litem or attorney ad litem) is a neutral party appointed by the court to represent the best interests of the child, or children.****

Is there a pending civil case? Yes No

If yes: Court #: _____ Case #: _____ County: _____ State: _____

Did you or someone else contact your local law enforcement agency? Yes No

Did law enforcement file charges against the alleged perpetrator? Yes No

Did the District Attorney's Office accept the charges? Yes No

Is there a pending criminal case? Yes No

If yes: Court #: _____ Case #: _____ County: _____ State: _____

CHILD PROTECTIVE SERVICES (CPS) INVOLVEMENT:

Did you or someone else contact CPS? Yes No

Did CPS validate the abuse allegations? Yes No

******By law, child abuse must first be reported to either law enforcement or protective services. Please attach the final results of those investigations if they are available to you.******

CHILD RECORD – PLEASE COMPLETE ONE FOR EACH CHILD INVOLVED:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Date of Birth: _____ Age: _____ Sex: _____

Documentation supports what type(s) of abuse: Sexual Physical Neglect Emotional

Are there other children in the home? Yes No

Are these children also victims of abuse? Yes No

Has the child been examined by a doctor with expertise in child abuse? Yes No

Doctor's Name: _____ Medical Exam Date: _____

Was there medical evidence to support the abuse allegations? Yes No
****If yes, please enclose the results of this exam if they are available to you.****

Has the child been examined by any other doctor? Yes No

Other doctor's name: _____ Medical Exam Date: _____

Was there medical evidence to support the abuse allegations? Yes No
****If yes, please enclose the results of this exam if they are available to you.****

Has the child had a psychological exam? Yes No
****If yes, please enclose the results of this exam if they are available to you.****

Psychological evaluation by: _____ Date: _____

Is the child attending ongoing therapy? Yes No

Has the child made disclosures of abuse to his/her therapist? Yes No
****If yes, please enclose the therapist records if they are available to you.****

Therapist's Name: _____

Has the child been interviewed by a social worker? Yes No

Did the child disclose abuse to the social worker? Yes No
****If yes, please enclose a report if it is available to you.****

If you answered "no" to all of the above questions, and you do not have substantiated reports from law enforcement or protective services, please call JFC prior to submitting this packet to ensure that your documentation meets our criterion.

CASE SUMMARY:

******Please provide us with a history of the abuse allegations. Make sure to clearly explain the current status of contact between the child victim and alleged perpetrator. Be sure also to outline any pending court cases, if any.******

AUTHORIZATION AND RELEASE OF LIABILITY

The undersigned, for and on behalf of himself/herself/themselves and the minor child(ren) known as _____ hereby authorizes Justice for Children to disseminate and release and all information concerning its investigation of the allegations of abuse and/or neglect involving the child(ren) to the media (whether print, radio or television or otherwise) and their representatives for their possible use.

_____ further agrees to release Justice for Children and its owners, officers, directors, shareholders, employees, agents, representatives, volunteers, administrators, legal representatives, successors, insurers, and assigns, and all other persons, firms or corporation who might be liable from all claims, demands and causes of action of whatever nature, charges, costs of court including but not limited to attorneys' fees, and from all liability and damages of any kind known or unknown, arising directly or indirectly out of the release and dissemination of such information concerning the Justice for Children investigation of the allegations of abuse and/or neglect involving the child(ren) to the media (whether print, radio or television or otherwise) and their representatives.

In further consideration of the services rendered and/or to be rendered by Justice for Children as above described, the undersigned do(es) hereby agree to indemnify and hold harmless Justice for Children and any other person, firm, or corporation bound to defend or pay judgments against it, from and against any and all claims, demands or causes of action, including attorneys' fees, incurred in the defense of such claim.

The undersigned expressly warrants to Justice for Children that he/she/they is/are of legal age and legally competent to execute this Release on behalf of himself/herself/themselves and the above named minor child(ren), and that Justice for Children made no other promise or statement or representation of any agent of Justice for Children, and that he/she/they execute(s) this Release of his/her/their own free will and accord without reliance on any representation of any kind or character not expressly set forth herein.

The undersigned acknowledge(s) and warrant(s) that he/she/they has/have read this Release and fully understand it to be a release of all claims, known or unknown, present or future, that he/she/they has/have or may have against the parties released, arising out of the matters described.

Executed this _____ day of _____ 20_____.

Print Name: _____

Signature: _____

STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned notary, on this the _____ day of _____ 20_____, personally appeared _____, who acknowledges that he/she has read and understands the affect of this Release, has the appropriate authority to execute same for and on behalf of himself/herself and the minor child(ren), and has executed same for the purposes and consideration set forth therein.

Notary Signature _____

NOTARY SEAL

Notary Public, State of _____