



CITY OF HOUSTON

Municipal Courts Department
Juvenile Case Manager Program



SCHOOL DISTRICT/CAMPUS INTEREST FORM

For participation in the Juvenile Case Manager Program, and/or to request that a Juvenile Case Manager be assigned to a particular campus, please use the form below.

School District Information

Name of District: _____

Target Campus(es) for Participation: _____

School District Contact Name/Title: _____

Phone: () _____, ext. _____ E-mail: _____

Campus Contact Name/Title: _____

Phone: () _____, ext. _____ E-mail: _____

Campus Information

Name of Campus: _____ Feeder Pattern: _____

Address: _____

City State Zip

Phone: () _____ Fax: () _____

Principal: _____ E-mail: _____

Problem Areas: (check all that apply)

Truancy Gang Involved Youth Low performance "At-risk" student population

Grade Level Intervention Requested: (circle all that apply)

6 **7** **8** **9** **10** **11** **12**

Overall Attendance 2010-2011: _____ Requested Grade Level Attendance 2010-2011: _____

Please e-mail or fax this form to: Attn: Catherine Klier
Email: catherine.klier@houstontx.gov / Fax: (713) 247-8747