

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ GRID: \_\_\_\_\_ REPORT #: \_\_\_\_\_

PINELLAS COUNTY SCHOOLS  
**TRUANCY INTERDICTION PROGRAM (TIP)**  
**LAW ENFORCEMENT OFFICER TRUANCY INTAKE FORM**  
**Section 1 - to be completed by Law Enforcement Officer**

Name (L, F, M): \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/20 \_\_\_\_  
AKA: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_  
Description: Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Scars, marks, tattoos: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City and state: \_\_\_\_\_ Zip: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Employment: \_\_\_\_\_  
DL #: \_\_\_\_\_ State: \_\_\_\_\_

CJIS / NCIC check results: 1) No violation or pick-up ( \_\_\_\_ ) 2) Pick-up order/warrant found ( \_\_\_\_ )  
3) SHOCAP ( \_\_\_\_ ) 4) Community control or aftercare violation ( \_\_\_\_ ) 5) Runaway ( \_\_\_\_ )  
Arrest: 1) No ( \_\_\_\_ ) 2) Yes ( \_\_\_\_ ) Charge: \_\_\_\_\_  
Any suspected law violations: 1) No ( \_\_\_\_ ) 2) Yes ( \_\_\_\_ ) What? \_\_\_\_\_  
Location where truant was contacted: \_\_\_\_\_  
Time of contact: \_\_\_\_\_ hours.  
Who was the truant in the company of at the time of contact (list names): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Gang involvement: 1) None ( \_\_\_\_ ) 2) Suspected ( \_\_\_\_ ) 3) Admitted ( \_\_\_\_ )  
Name of gang or cult: \_\_\_\_\_

Mother \_\_\_\_\_ Father \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_  
Work # \_\_\_\_\_  
Cell phone or pager # \_\_\_\_\_  
Employment \_\_\_\_\_  
Step-parent or guardian \_\_\_\_\_

Parent(s)/guardians(s) contacted by Law Enforcement Officer: 1) No ( \_\_\_\_ ) 2) Yes ( \_\_\_\_ )  
Time of contact with Parent(s)/guardians(s): \_\_\_\_\_ hours.  
If no contact, why? \_\_\_\_\_  
Law Enforcement Officer delivering truant child: \_\_\_\_\_ ID # \_\_\_\_\_  
Agency: \_\_\_\_\_

COMMENTS: