

**ST. JOSEPH PROBATE COURT**

James N. Fox, Judge

Peter L. Morgan  
Executive Director

Sean R. Coleman  
Director of Detention

THOMAS N. FREDERICK  
JUVENILE JUSTICE CENTER  
1000 South Michigan Street  
South Bend, IN 46601-3426  
Phone: (574) 235-KIDS (5437)  
Fax: (574) 235-5342

Scott E. Filley  
Director of Probation

Jeffrey A. Gensinger  
Director of Intake

**PLEASE READ ALL THE BELOW INFORMATION BEFORE COMPLETING COMPLAINT**

Dear Parent/Guardian:

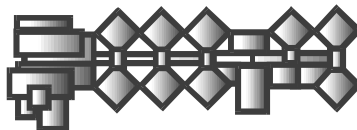
The purpose for the attached form is to provide our department with the information about your child's willingness to obey the reasonable rules and commands of your household. It is not meant to take the place of a police report if your child is committing acts that could be considered criminal in nature.

It is imperative that you fill out the **entire** attached form, including the types of behavior that your child is exhibiting; failure to do this could result in the letter being sent back to you for this information.

Please be aware that this department is limited as to the options it has on an ungovernable complaint. Completing the form will not remove any of your responsibilities or rights as a parent. In most cases a formal court petition will not be filed.

Indiana law prohibits detaining (locking up) a child for ungovernable behavior. You should also understand that completing this form **will not be cause for removal of your child from your home and/or placement of that child into an institution.**

If your child is committing acts which could be considered criminal in nature, please report such acts to the appropriate enforcement agency.



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**UNGOVERNABLE CHILD COMPLAINT**

- ▶ Only a parent or guardian of a child can make this complaint.
- ▶ All complaints about children must be made in writing.

**Please type or print clearly. If your child is committing acts which would be considered criminal in nature a report should be made to the appropriate law enforcement agency.**

Child's Full Name \_\_\_\_\_

Birth date \_\_\_\_\_ Birthplace \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Age \_\_\_\_\_

Living with (Names) \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Below, give the date, time and description of each incident. Please list them in the order that they happened. These facts must be what you, the complainant, saw and heard, not what someone else has told you. Use the back of the form or additional sheet of paper if necessary.

I, \_\_\_\_\_ claim that \_\_\_\_\_ my son/daughter is  
An ungovernable child. My claim is based on the above facts. I would like the Probation Department to  
help in the following way:

Where have you gone for help before ? \_\_\_\_\_

Will you participate in family counseling ? Yes ( ) No ( )

Are you willing to make changes in how you handle family problems ? Yes ( ) No ( )

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

I affirm under the penalties for perjury that the foregoing representations are true.

**Return form to:**  
Juvenile Probation Department  
1000 South Michigan St  
South Bend, IN 46601

Signed: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Are you the legal guardian ? Yes ( ) No ( )

Address: \_\_\_\_\_

Probation Phone- (574) 235-5437