STATE OF HAWAII
DEPARTMENT OF DEFENSE
HAWAII NATIONAL GUARD
YOUTH CHALLENGE ACADEMY
P.O. BOX 75348
KAPOLEI, HI 96707-0348

PEARL SHECK
DIRECTOR

JAMES LOGUE
ASSISTANT DIRECTOR

Hawaii Youth Challenge Academy Juvenile Probation Verification Form

By signing below, you are authorizing Juvenile Probation to verify and release your adjudication history. For youth currently supervised, you are authorizing Juvenile Probation to verify and release information or court orders, probation or other conditions (terms of supervision) to the Youth Challenge program to determine your eligibility. Applicants must not be under indictment or ever convicted of a felony (or any crime that would be considered to be a felony if perpetrated by an adult), and not currently on parole or probation for other than juvenile status offenses or misdemeanors.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date:_____

Applicant Printed Name: _____ Date:_____

Applicant Signature: _____

Juvenile Probation Officer/Authorized Representative Name:_____

Phone #:_____

Email:_____

If 18, has the applicant ever been charged or convicted of a felony offense? ☐ No ☐ Yes

---------- Below to be completed by Juvenile Justice Representative ----------

I, _____, juvenile probation officer or authorized Juvenile Probation Representative, for Youth Challenge program applicant above, declare that he/she is not currently under indictment, or ever convicted of a felony (or any crime that would be considered to be a felony if perpetrated by an adult), and not currently on parole or probation for other than juvenile status offenses or misdemeanors. If currently supervised, he/she does not have unresolved charges or will not have court requirements for the 22 weeks they will be residing at the Youth Challenge Program, and I support their attendance.

_____	_____	_____
Juvenile Probation Staff Signature	Title	Date