

Cherokee County JDTC

Educational Track Referral

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|-------------------------------|-----------------|
| Youth's Name: | Case #: |
| Street Address: | |
| City: | Zip Code: |
| Parent/Guardian Name: | |
| Parent/Guardian Phone Number: | |
| School: | Grade: |
| Referred By: | Date Submitted: |

**Attach complaint and incident report.*

Office use only:

| To be completed: | Date Completed |
|---|----------------|
| Juvenile Drug Court Educational Track Agreement | |
| Continuance and Waiver or Time Limits | |
| Pay \$75.00 to clerk | |
| Attend Educational Track Class with Parent/Guardian | |
| Dismissal filed | |