
GLENN A. GRANT, J.A.D.
Acting Administrative Director of the Courts

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DIRECTIVE #32-17**[Supersedes Directive #10-09 and
Supplement to Directive #10-09]****[Questions or comments may be directed to
(609) 815-2900, ext. 55350]****TO: Assignment Judges
Trial Court Administrators****FROM: Glenn A. Grant, J.A.D.** **SUBJECT: Family -- Revised Juvenile Delinquency Complaint Form (CN 10207) --
(1) Referrals Initiated by School Officials; (2) Arrest Date; (3) Home and
Cell Phone Number****DATE: December 15, 2017**

This superseding directive distributes the attached revised juvenile delinquency complaint form (CN 10207) as approved by the Judicial Council. This revised version is for use beginning **January 2, 2018**. The Judiciary collaborated with the Juvenile Justice Commission (JJC) to add to the complaint a question regarding school official referrals. This will facilitate the collection of data on the number of juvenile delinquency complaints initiated by school officials. The revised complaint includes the following sentence and a "yes or no" selection for law enforcement: "Was this matter referred to law enforcement by a school official?"

The revised complaint also now includes a space for an arrest date, which will facilitate matching the offense between Family Court records and State Police records. Lastly, the complaint previously had space for one phone number for the juvenile; it now will provide space for both a home phone number and a cell phone number for the juvenile.

Attachment: Revised Juvenile Delinquency Complaint (CN 10207)

cc: Family Presiding Judges
Attorney General Christopher S. Porrino
County Prosecutors
Kevin M. Brown, Executive Director, JJC
Steven D. Bonville, Chief of Staff
AOC Directors and Assistant Directors
Ann Marie Fleury, Special Assistant to the Administrative Director
Melaney S. Payne, Special Assistant to the Administrative Director
David Tang, Chief, Family Practice Division
Family Division Managers
Assistant Family Division Managers



Complaint – Juvenile Delinquency

Chancery Division, Family Part, County of _____

The State of New Jersey in the interest of:		Docket number: FJ- _____ - _____ - _____ - _____	
AKA:		Juv/Party ID number:	
Mailing address: (Street)		Race:*	Sex:
		Date of Birth:	Age:
City, State and Zip Code:		* 1 Caucasian; 2 Black; 3 Hispanic; 4 Asian; 5 American Indian; 6 Other; 7 Unknown	
Residing in: (township or municipality)		Height:	Weight:
Phone: Home: Cell:		Eye Color:	Hair Color:
		Name and address of school (and grade) or employer:	
1. The parent(s) or guardian of the above named juvenile are: (first name, last name)			
Address:		Phone:	Relationship:
2. If the above named juvenile is not residing with parent or guardian, he/she is residing with: (name)			
Address:		Phone:	Relationship:
Charge No.:	Arrest Date:	The undersigned complainant: (first name, last name)	
Of: (identify department or agency)		Address:	
says: the above named juvenile is alleged, upon <input type="checkbox"/> personal knowledge, <input type="checkbox"/> information supplied by others, to be delinquent in that, on or about ____ / ____ / ____ at ____ a.m. / p.m. the above named juvenile did: [Set forth facts regarding time, manner, place and the essential elements of the alleged act.]			
Was this matter referred to law enforcement by a school official? <input type="checkbox"/> Yes/ <input type="checkbox"/> No			
Co-Defendant[s] Name, Address and Phone No.:			
Witness[es] Name, Address, and Phone No.:			
Violation of (statutory citation and title):			Degree:
I certify that the foregoing statements made by me are true to the best of my knowledge, information and belief. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.			
Signature of Complainant/Date:		Officer and Department filing police report:	
Charge No.:	Arrest Date	The undersigned complainant: (first name, last name)	
Of: (identify department or agency)		Address:	
says: the above named juvenile is alleged, upon <input type="checkbox"/> personal knowledge, <input type="checkbox"/> information supplied by others, to be delinquent in that, on or about ____ / ____ / ____ at ____ a.m. / p.m. the above named juvenile did: [Set forth facts regarding time, manner, place and the essential elements of the alleged act.]			
Was this matter referred to law enforcement by a school official? <input type="checkbox"/> Yes/ <input type="checkbox"/> No			
Co-Defendant[s] Name, Address and Phone No.:			
Witness[es] Name, Address, and Phone No.:			
Violation of (statutory citation and title):			Degree:
I certify that the foregoing statements made by me are true to the best of my knowledge, information and belief. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.			
Signature of Complainant/Date:		Officer and Department filing police report:	