

Ministry of Justice

FAMILY COURT- KINGSTON AND ST. ANDREW

INTAKE RECORD FORM TO BE COMPLETED BY POLICE

Investigating Officer Name:	Surname:
Rank:	Contact Information
Station attached to:	Station Phone No.(s):
	Cell# :

Please give particulars of the accused child, parents/guardian of child, complainant information		
NAME	ADDRESS	Date of Birth and contact info Phone Nos. (etc)
Accused:		
Parents/guardian of accused:		
Complainant:		
Parents/guardian of complainant (if he/she is a minor):		

BRIEF STATEMENT OF FACT/CIRCUMSTANCES OF THE CASE

AGENCY/COURT	SERVICE REQUESTED (please state the charges against the accused)
COURT'S OFFICE	

Date:

Signature of Officer: