National Survey of Youth in Custody

Facility Youth Roster

Facility Name: <name>
State: <ST>
Visit Date: x/xx/2018
Age of Consent: xx

Westat Facility ID: 9999
Youth Count: 99

* Was this youth placed in this facility by a state agency or state court?
Note: Federal, tribal, county, or municipal are all non-state entities.

Sequence ID	DOB	Gender	Race / Ethnicity	Admission Date	Most Serious Offense	(If Other, Specify)	Placed by State*? Y/N