Appendix D: CJRP Questionnaire

All changes from the 2019 CJRP instrument are denoted with red font. Variable names and question numbering may be different.

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INTRO PAGES

LOGIN		
ASK	All Respondents	
census pilot sto reliable statisti agencies and s most complete	the 2021 Census of Juveniles in Residential Placement (CJRP) Pilot Study. Your participation in this udy will help improve the ongoing CJRP data collection. The CRJP provides comprehensive and ical data on the residential placement of juvenile offenders; facilitates the needs of juvenile justice ocial service organizations that address the many problems faced by today's youth; and gathers the e and accurate information regarding issues of juvenile detention, correction, and placement. Thank articipation in this endeavor.	
Please enter th case sensitive.	ne password provided in the mailing packet sent to your facility. <i>Please note that the password </i>	

INTRO		
ASK	All Respondents	
additional faci • Sessions will e • A juvenile resi	questionnaire only for [FACILITY_NAME] . We are not requesting forms for any lities in this current round of data collection. expire (requiring you to log back in) after 30 minutes of inactivity. dential facility is a place where young persons who have committed offenses may be housed facility has living/sleeping units, such as wings, floors, dorms, barracks, or cottages on one	
Any buildings	with living/sleeping units that are not on the same campus should be considered separate hould not be included in this questionnaire.	

SECTION 0: FACILITY AND CONTACT INFORMATION

SU_NAM	S0_NAME_CONFIRM		
ASK	All Respondents		
Facili	and Contact Information		
	ne following name listed for this facility. TY_NAME]		
-	correct name for this facility?		
-	correct name for this facility? Yes		

S0_NAME_UPDATE	
ASK	If SO_NAME_CONFIRM = 2
What is the correct nar	ne of this facility?

S0_MAILADDR_CONFIRM		
ASK		All Respondents
We have the following mailing address listed for this facility. [FACILITY_MAILADDR]		
Is this the correct mailing address for this facility?		
1	Yes	
2	No	

S0_MAILADDR_UPDATE		
ASK	If SO_MAILADDR_CONFIRM = 2	
What is the correct mailing address for your facility?		

S0_PHYSADDR_CONFIRM		
ASK		All Respondents
We have the following physical address listed for this facility. [FACILITY_PHYSADDR] Is this the correct physical address for this facility?		
1 Yes		
2	No	

S0_PHYSADDR_UPDATE	
ASK	If SO_PHYSADDR_CONFIRM = 2
What is the correct phy	rsical address for your facility?

SECTION 1: GENERAL INFORMATION

S1_AGENCY			
ASK		All Respondents	
1a. Is this facility part of a larger agency?			
1	Yes		
	No		

S1_AGENCY_NAME	
ASK	If S1_AGENCY = 1
1b. What is the name c	of this agency?

S1_OWN		
ASK	All Respondents	
2a. Is this facility OWNE 1 A private r 2 A for profi	ons 2 and 3 ask who OWNS this facility. Later you will be asked who OPERATES this facility. D by one or more of the following? <i><i>Select all that apply.</i></i> non-profit agency t agency nent agency	

S1_OWN_NAME	
ASK	If S1_OWN = 1, 2 or missing
2b. What is the name o	f the private non-profit or for-profit agency that OWNS this facility?

S1_OWN	I_GOVTLEVEL
ASK	If S1_OWN = 3 or missing
	is the level of the government agency that OWNS this facility? <i> Select all that apply</i>
1	A Native American Tribal Government
2	Federal
3	State
4	County
5	Municipal (includes Washington, DC)
-	Other – Please specify:

S1_OPERATE	
ASK	All Respondents

NOTE: Questions 4 and 5 ask who OPERATES this facility.

4a. Is this facility OPERATED by one or more of the following? <i>Select all that apply.</i>

- 1 A private non-profit agency
- 2 A for profit agency
- 3 A government agency

S1_OPERATE_NAME	
ASK	If S1_OPERATE = 1, 2 or missing

4b. What is the name of the private non-profit or for-profit agency that OPERATES this facility?

S1_OPERATE_GOV	TLEVEL
ASK	If S1_OPERATE = 3 or missing
with)? <i>Select all 1 A Nati 2 Feder 3 State 4 Count 5 Munic</i>	ive American Tribal Government al

S1_CLAS	SIFY_A
ASK	If FORM = A
6. What t	ype of residential facility is the one listed on the front cover? <i> Select all that apply </i>
1	Detention center: A short-term facility that provides temporary care in a physically restricting
	environment for juveniles in custody pending court disposition and, often, for juveniles who are
	adjudicated delinquent and awaiting disposition or placement elsewhere, or are awaiting transfer to
	another jurisdiction. In some jurisdictions, detention centers may also hold juveniles committed for
	short periods of time as part of their disposition (e.g., weekend detention).
2	Long-term secure facility: A specialized type of facility that provides strict confinement and long term treatment generally for past adjudication committed invention efforders. Includes training
	long-term treatment generally for post-adjudication committed juvenile offenders. Includes training schools, juvenile correctional facilities, youth development centers.
3	Schools, juvenile confectional facilities, you'll development centers. Schools, juvenile confectional facilities, you'll development centers.
5	committed by the courts and assigns them to appropriate correctional facilities.
4	 committed by the courts and assigns them to appropriate correctional facilities. correctional facilities. correctional facilities.
	intended for post-adjudication commitments in which young persons are allowed extensive contact
	with the community, such as attending school or holding a job.
5	
	planned treatment program for youth (substance abuse, sex offender, behavioral/mental health, etc.)
	in conjunction with residential care. Such facilities generally require specific licensing by the state that
	may require that treatment provided is Medicaid-reimbursable.
6	Ranch, forestry camp, wilderness or marine program or farm: These are long-term generally
	non-secure residential facilities often located in a relatively remote area. The juveniles participate in a
	structured program that emphasizes outdoor work, including conservation and related activities.
7	Runaway and homeless shelter: A short-term facility that provides temporary care in a
	physically unrestricted environment. It can also provide longer-term care under a juvenile court
	disposition order.
8	Other type of shelter: This includes emergency non-secure shelters where juveniles are
	housed short-term until another placement can be found.
9	Other: This includes independent living programs and anything that cannot be classified
	above. – Please specify:

S1_CLASSIFY_B	
ASK	If FORM = B
6. What	type of residential facility is the one listed on the front cover? <i> Select all that apply </i>
1	-A short-term facility that provides temporary care in a physically restricting environment for juveniles in custody pending court disposition and, often, for juveniles who are adjudicated delinquent and awaiting disposition or placement elsewhere, or are awaiting transfer to another jurisdiction. In some jurisdictions, detention centers may also hold juveniles committed for short periods of time as part of their disposition (e.g., weekend detention).
2	A specialized type of facility that provides strict confinement and long-term treatment generally for post-adjudication committed juvenile offenders. Includes training schools, juvenile correctional facilities, youth development centers.
3	A short-term facility that screens juvenile offenders committed by the courts and assigns them to appropriate correctional facilities.
4	A long-term facility that is generally non-secure and typically intended for post-adjudication commitments in which young persons are allowed extensive contact with the community, such as attending school or holding a job.
5	A facility that focuses on providing some type of individually planned treatment program for youth (substance abuse, sex offender, behavioral/mental health, etc.) in conjunction with residential care. Such facilities generally require specific licensing by the state that may require that treatment provided is Medicaid-reimbursable
6	These are long-term generally non-secure residential facilities often located in a relatively remote area. The juveniles participate in a structured program that emphasizes outdoor work, including conservation and related activities.
7	A short-term facility that provides temporary care in a physically unrestricted environment. It can also provide longer-term care under a juvenile court disposition order.
8	Other type of shelter including emergency non-secure shelters where juveniles are housed short-term until another placement can be found.
9	Other including independent living programs and anything that cannot be classified above. – Please specify:

S1_CLASSIFY_SCREEN	PROG
ASK	All Respondents
Does this facility screet	n young persons to assign them to the appropriate program within this facility?

No

2

S1_CLASSIFY_SCREEN	IV
ASK	All Respondents
Does this facility scree 1 Yes 2 No	n young persons to assign them to the appropriate living arrangement within this facility?

S1_CLASS	IFY_SCREEN	отн
ASK		All Respondents
Does this	facility scree	en young persons to assign them to another facility?
1	Yes	
2	No	

All Respondents
en young persons to assign them to a community-based program?

S1_CLASSIFY_POP	
ASK	All Respondents
Which of 1 2	the following types of young persons does your facility house? <i>Select all that apply.</i> Young persons awaiting adjudication Young persons awaiting disposition
3	Young persons post disposition awaiting placement
4	Young persons post disposition in placement
5	Young persons awaiting transfer to another facility within this jurisdiction
6	Young persons awaiting transfer to another jurisdiction
7	None of the above

S1_CLASSIFY_CONTA	ст
ASK	All Respondents
Are any young persor	s in this facility allowed contact with the community, such as attending school or vocational

training, or working outside this facility?

1 Yes 2

No

K	All Respondents
oos this	acility provide an individually planned treatment program for youth in conjunction with residential
	acility provide an individually planned treatment program for youth in conjunction with residential
oes this are?	
	acility provide an individually planned treatment program for youth in conjunction with residential Yes

S1_CLASS	IFY_OUTDO	OR
ASK		All Respondents
		ide a structured program for youth emphasizing outdoor experiences, such as through ervation training?
1	Yes	
2	No	

S1_CLASSIFY_JOBTRAI	N
ASK	All Respondents
Does this facility provid	de a vocational training program, workforce development services, or job training?

Yes 2

No

S1_INSTRUCT	
ASK	All Respondents

 IMPORTANT INSTRUCTIONS

The following items ask you to use your records to provide counts of persons who had assigned beds in this facility at the end of the day on **[REF_DATE].** This date has been chosen carefully to give a standardized count of persons in facilities like yours across the country. You will be asked to classify your facility population into two age groups:

- 1. those persons under age 21; and
- 2. those persons age 21 and older.

You will then be asked to classify each person UNDER THE AGE OF 21 into one of the two following categories:

- 1. those here because they have been charged with or court-adjudicated for an offense. An offense is any behavior that is illegal in your state for underage persons alone or for both underage persons and adults.
- 2. those here for reasons other than offenses.

Please classify each person under age 21 into just one of these categories. Detailed descriptions of the above categories are provided in the questions themselves and on the Offense Codes on Pages 19 and 20 of the CJRP form. You may also view the descriptions <link>here</link>.

Please use your records to answer the following questions.

S1_COUNT	
ASK	All Respondents
this facility in each of th <i>Include persons who</i>	rds, at the end of the day on [REF_DATE] , how many persons had assigned beds in ne following categories? Were temporarily away (such as such as those released for medical care at a hospital), but REF_DATE_SHORT]. Please write "0" if there are NO persons in a category.
a. Under the age b. 21 or older c. Total	of 21

S1_DEFINE	
ASK	If S1_COUNT (a) > 0 or missing
	ions, "young persons" refers to "young persons under the age of 21 who have assigned specified in the question.

K	If S1_COUNT (a) > 0 or missing	
the end of lowing cat	the day on < b>[REF_DATE] , how many young persons did this facility have for each of egories?	the
	rsons who were temporarily away (such as such as those released for medical care at a hosp beds on [REF_DATE_SHORT]. Please write "0" if there are NO persons in a category.	ital), bu
that is		
•	ANY offense that is illegal for both adults and underage persons. ANY offense that is ILLEGAL IN YOUR STATE for underage persons but not for adults. Examples are running away, truancy, incorrigibility, curfew violation, and underage liquor violations. Count persons with these behaviors here ONLY IF THE BEHAVIORS ARE ILLEGAL IN YOUR STATE. This includes those CHINS (Children in Need of Services) and PINS (Persons in Need of Services) who are here BECAUSE of an offense. ANY offense being adjudicated in juvenile or criminal court, including a probation or parole violation.	
EXCLU		
•	Young persons who have committed one or more offenses in the past BUT are here FOR REASONS OTHER THAN OFFENSES.	
•	Young persons here BECAUSE OF REASONS OTHER THAN OFFESES, such as neglect, abuse, dependency, abandonment, behavioral/mental health problems, substance abuse problems, etc.	
•	Young persons who have run away, been truant or incorrigible, or violated curfew, if these behaviors are NOT considered illegal in your state. Young persons who are PINS (Persons in Need of Services) or CHINS (Children in	
	Need of Services) who are here because of REASONS OTHER THAN OFFENSES.	
o. Young INCLU	persons assigned beds for other reasons DE:	
•	Young persons here for NON-OFFENSE REASONS such as neglect, abuse, dependency, abandonment, behavioral/mental health problems, substance abuse problems, or another NON-OFFENSE reason.	
•	Young persons who have committed one or more offenses in the past BUT are here FOR REASONS OTHER THAN OFFENSES.	
•	Young persons who have run away, been truant or incorrigible, or violated curfew, if these behaviors are NOT considered illegal in your state.	
•	Young persons here due to voluntary or non-offense related admissions.	
EXCLU		
•	Young persons here BECAUSE THEY WERE CHARGED WITH OR COURT-ADJUDICATED FOR AN OFFENSE.	
c. Total		

S1_ONSITE_TRE	AT
ASK	If S1_COUNT (a) > 0 or missing
OUTSIDE<th>efers to any location on the facility grounds. > refers to any location in the community or off facility grounds. cility provide ON-SITE RESIDENTIAL TREATMENT INSIDE this facility?</th>	efers to any location on the facility grounds. > refers to any location in the community or off facility grounds. cility provide ON-SITE RESIDENTIAL TREATMENT INSIDE this facility?
1 Yes 2 No	;

S1_ONSITE_TREAT_TYPE

ASK	If S1_COUNT (a) > 0 or missing	
12b. Wh	at kind of treatment is provided INSIDE this facility? <i> Select all that apply </i>	
1	Mental health treatment	
2	Behavioral modification or therapy	
3	Substance abuse treatment	
4	Sex offender treatment	
5	Treatment for arsonists	
6	Treatment specifically for violent offenders	
7	Trauma treatment	
8	Anger management	
9	Other – Please specify:	

S1_LOCKS	SITS	
ASK	If S1_LOCKED = 1 or missing	
In what si 1 2 3 4	ituations are young persons locked in their sleeping rooms? <i><i>Select all that apply.</i></i> When they are out of control When they are suicidal For medical reasons other than suicide During shift changes	
5	Whenever they are in their sleeping rooms	
6	As part of a set schedule	
7	Other – Please specify:	

S1_LOCK	SCHED_A	
ASK	If S1_LOCKSITS = 5 or missing and FORM = A	
When are	e young persons locked in their sleeping rooms? <i>Select all that apply.</i>	
When are 1	e young persons locked in their sleeping rooms? <i><i>Select all that apply.</i></i> All of the time	
When are 1 2		
1	All of the time	

S1_LOCKS	CHED_B		
ASK		If S1_LOCKSITS = 5 or missing and FORM = B	
When are 1 2 3 4	young persor Rarely Sometime Often Always	ns locked in their sleeping rooms? <i><i>Select all that apply.</i></i> s	

S1_LOCK	FEATS	
ASK	lf .	S1_COUNT (a) > 0 or missing
	this facility have a all that apply.	any of the following features intended to confine young persons within specific areas?
1	Doors for sectors	ure day rooms that are locked by staff to confine young persons within specific areas or
2	-	orridor, or other internal security doors that are locked by staff to confine young n specific areas
3	Outside doors	that are locked by staff to confine young persons within specific buildings
4	External gates persons	s in fences or walls WITHOUT razor wire that are locked by staff to confine young
5	External gates	in fences or walls WITH razor wire that are locked to confine young persons
6	Other – Pleas	e specify:
7	The facility ha	is none of the above features.

S1_OUTDO	OORLOCKED	
ASK		If S1_COUNT (a) > 0 or missing
18a. Are o	utside doors	to any buildings with living/sleeping units in this facility ever locked?
1	Yes	
2	No	

S1_OUTD	OORLOCKED	_REAS
ASK		If S1_OUTDOORLOCKED = 1 or missing
21b. Why inside this		doors to buildings with living/sleeping units in this facility locked to keep young persons
1	Yes	
2	No	

S1_OUTD	DRLOCKED_WHEN
ASK	If S1_OUTDOORLOCKED = 1 or missing
18c. WHEI apply.	are outside doors to buildings with living/sleeping units in this facility locked? <i>Select all that</i>
1	All of the time
2	Rarely, no set schedule
3	During the day for 2 hours or less
4	During the day for more than 2 hours
5	At night
6	Other – Please specify:

S1_DEATHS	
ASK	If S1_COUNT (a) > 0 or missing

INSIDE refers to any location on the facility grounds.

OUTSIDE refers to any location in the community or off facility grounds.

19. During the YEAR between [YEAR_REF_START] and [YEAR_REF_END], did ANY young persons die while assigned a bed at this facility at a location either INSIDE or OUTSIDE of this facility?

- 1 Yes
- 2 No

S1_DEATHS_COUNT

ASK	If S1_DEATHS = 1 or missing
20. How many young pr and [YEAR_REF_END]?	ersons died while assigned beds at this facility during the year between [YEAR_REF_START]
Person(s)	

SECTION 2a: LENGTH OF STAY

S2a_RELEASE14	
ASK	If S1_COUNT (a) > 0 or missing
How many young perso between [REF_DATE_1 [,]	ons were released from this facility in the 14 days prior to [REF_DATE], that is 4] and [REF_DATE]?
<i>Please do not includ released for medical ca</i>	e any young persons who were only temporarily released from your facility, such as those re at a hospital.
Young pers	ons released in the 14 days prior to [REF_DATE]
S2a RELEASE30	
ASK	If S1_COUNT (a) > 0 or missing

How many young persons were released from this facility in the 30 days prior to [REF_DATE], that is between [REF_DATE_30] and [REF_DATE]?

<i>Please do not include any young persons who were only temporarily released from your facility, such as those released for medical care at a hospital.</i>

_____ Young persons released in the 30 days prior to [REF_DATE]

S2a_LOS30	
ASK	If S1_COUNT (a) > 0 or missing and FORM = B
days prior to [REF_DAT days in custody for the	length of stay (in days) for all young persons who were released from this facility in the 30 E], that is between [REF_DATE_30] and [REF_DATE]? To calculate, sum the total number of youths who were released in the last 30 days. Divide the total number of days by the total used in the last 30 days to get an average length of stay. Please report up to 2 decimal
Average lei	ngth of stay (in days) for all young persons released in the 30 days prior to [REF_DATE]

	SINTRO_A	
ASK		If S1_COUNT (a) > 0 or missing and FORM = A
	section you wi ility prior to [F	ll be asked to record individual-level information on the last 20 young persons released from EF_DATE].
		persons who were released from your facility, please provide the sex assigned at birth, date nost serious offenses, date of admission, date of release and where this person was released
		ude any young persons who were only temporarily released from your facility, such as those care at a hospital.
Dat	a requested a	nd required format for each person:
1.	An identifier	(ID number or first name and last initial)
2.	Sex assigned	at birth (select 1 code from list below)
	1. Ma	e
	2. Fen	nale
3.	Date of birth	(month/day/year)
4.		1 code from list below)
	1. Wh	ite, not of Hispanic origin
	2. Bla	k or African American, not of Hispanic origin
		panic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other
		nish culture or origin, regardless of race)
		erican Indian/Alaska Native, not of Hispanic origin
		an, not of Hispanic origin
		ive Hawaiian or other Pacific Islander, not of Hispanic origin
		o or More Races, not of Hispanic origin (specify)
5.		serious offenses resulting in this placement. If the offense(s) was also a probation or parole
		ease check the box to the right of the code you entered. See the Offense Codes
		/link> for reference.
6.		was admitted to this facility for the most serious offenses listed in #5 (month/day/year)
7.		was released from this facility for the most serious offenses listed in #5 (month/day/year)
8.		on was release to (text box for written response)

SK		If S1_COUNT (a) > 0 or missing and FORM = B
		ı will be asked to record individual-level information on the last 20 young persons released from o [REF_DATE].
		ung persons who were released from your facility, please provide the sex assigned at birth, date ee most serious offenses, date of admission, date of release and where this person was released
		nclude any young persons who were only temporarily released from your facility, such as those cal care at a hospital.
b>Dat	a requeste	ed and required format for each person:
1.	An identi	fier (ID number or first name and last initial)
2.	Sex assig	ned at birth (select 1 code from list below)
	1.	Male
		Female
3.		irth (month/day/year)
4.		ect 1 code from list below)
		White, not of Hispanic origin
		Black or African American, not of Hispanic origin
	3.	Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other
		Spanish culture or origin, regardless of race)
	4.	American Indian/Alaska Native, not of Hispanic origin
	5.	Asian, not of Hispanic origin
	6.	Native Hawaiian or other Pacific Islander, not of Hispanic origin
	7.	Two or More Races, not of Hispanic origin (specify)
5.	Three mo	ost serious offenses resulting in this placement. If the offense(s) was also a probation or parole
	violation,	please check the box to the right of the code you entered. See the Offense Codes
	<link/> <u>her</u>	<u>re</u> for reference.
6.	Date pers	son was admitted to this facility for the most serious offenses listed in #5 (month/day/year)
7.	Date pers	son was released from this facility for the most serious offenses listed in #5 (month/day/year)
8.		erson was release to (select 1 code from list below)
		Released to another facility
		Released to the supervision of probation or parole
		Released without supervision of probation or parole
		Other (specify)
	5.	Don't know

ASK	If S1_COUNT (a)	> 0 or missing	
<u><u>OR</u><b>[REF_]</u>	u> enter information below for t DATE].	ease upload your Template file prov the last 20 young persons released	
· · · · · · · · · · · · · · · · · · ·	chod Adding Dorconc' when all r	persons have been entered	
LIICK FINI	shed Adding Persons' when all p	cisons have been entered.	
	IPLOAD TEMPLATE]		on-ADD A PERSON]
		OR [butt	on-ADD A PERSON] HED ADDING PERSONS]
		OR [butt	

S2a_LOSROSTER_UPL	OAD
ASK	Respondents who choose File Upload
FILE UPLOADS<td>></td>	>
Select the fileClick the "UpOnce your file	owse" button to browse for the file you'd like to upload to our site. e you want to upload. load File" button to start the uploading process. e has been uploaded successfully the file name will appear in the box below. ' after you file has been uploaded.
Select File to Uplo [button-Browse]	ad
[button-Upload file] No files have been up	oaded

[button-Return to Section 2a Instructions] [button-Submit]

S2a_LOSROSTER_ADD_A	
ASk	K Respondents who choose to Add a Person and FORM = A
1.	Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.
2.	Sex assigned at birth 1 Male 2 Female
3.	Date of birth
4.	 Race 1 White, not of Hispanic origin 2 Black or African American, not of Hispanic origin 3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race) 4 American Indian/Alaska Native, not of Hispanic origin 5 Asian, not of Hispanic origin 6 Native Hawaiian or other Pacific Islander, not of Hispanic origin 7 Two or More Races, not of Hispanic origin (specify)
5.	What were the three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes k>here for reference.
6.	On what date was this person admitted to this facility for the three most serious offenses? If more than one date applies, enter the earliest one for the offenses listed.
7.	On what date was this person released from this facility?
8.	Where was this person released to?
[bu	itton-Cancel] [button-Add Person]

AS	Respondents who choose to Add a Person and FORM = B
1.	Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.
2.	Sex assigned at birth 1 Male 2 Female
3.	Date of birth
4.	 Race 1 White, not of Hispanic origin 2 Black or African American, not of Hispanic origin 3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race) 4 American Indian/Alaska Native, not of Hispanic origin 5 Asian, not of Hispanic origin 6 Native Hawaiian or other Pacific Islander, not of Hispanic origin 7 Two or More Races, not of Hispanic origin (specify)
5.	What were the three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes <link/> <u>here</u> for reference.
6.	On what date was this person admitted to this facility for the three most serious offenses? If more than one date applies, enter the earliest one for the offenses listed.
7.	On what date was this person released from this facility?
8.	 Where was this person released to? 1 Released to another facility 2 Released to the supervision of probation or parole 3 Released without supervision of probation or parole 4 Other (specify)

S2a_FEAS_ETHNICITY	
ASK	If S1_COUNT (a) > 0 or missing
would be able to report	ment the Hispanic ethnicity of a young person separate from his/her race, such that you t both the Hispanic ethnicity and the race(s) for each young person in your facility? <i>For Black, or Non-Hispanic and Black.</i>

S2a_FEAS_RACE	
ASK	If S1_COUNT (a) > 0 or missing
	ment all races of a young person who identifies as two or more races, such that you would

be able to report all races associated with each young person in your facility?

- 1 Yes 2
 - No

ASK	If S1_COUNT (a) > 0 or missing
	thnicity information determined? <i>Select all that apply</i>
1 F	Race/ethnicity are self-reported by youth
2 F	Race/ethnicity is determined by staff
3 F	Race/ethnicity is obtained from the referral source (e.g., Juvenile court)
4 (Other, please specify

S2a_FEAS_GENDERID	
ASK	If S1_COUNT (a) > 0 or missing
	ment gender identity of all young persons, such that you would be able to report both the ad the self-reported gender identity for each young person in your facility? <i>For example, male to female.</i>

Yes 1

2 No

SECTION 2: PERSON LEVEL DATA

S2_INT	RO
ASK	If S1_COUNTCATS (a) > 0 or missing
[RE]	section you will be asked to record individual-level information on the young persons in the facility on F_DATE] specifically because they were charged with or court-adjudicated for an offense. You d <u>[fill S1_COUNTCATS (a) value]</u> persons that fit this description in Section I, question 10b.
You ma locatior	Su>[fill S1_COUNTCATS(a) value] persons, please provide the 10 pieces of information listed below. y find it helpful to use this <link/> <u>Excel Template</u> to fill information in. Save the Template to a n of your choice before filling it out. On the next screen you may re-upload the Template or instead enter ation directly into the webpage.
Dat	a requested and required format for each person:
	An identifier (ID number or first name and last initial)
2.	Sex assigned at birth (select 1 code from list below)
	1. Male
	2. Female
3.	Date of birth (month/day/year)
4.	Race (select 1 code from list below)
	1. White, not of Hispanic origin
	2. Black or African American, not of Hispanic origin
	3. Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other
	Spanish culture or origin, regardless of race)
	4. American Indian/Alaska Native, not of Hispanic origin
	5. Asian, not of Hispanic origin
	6. Native Hawaiian or other Pacific Islander, not of Hispanic origin
_	7. Two or More Races, not of Hispanic origin (specify)
5.	Who placed this person at this facility (select 1 code from list below)
	1. Court, probation agency, or law enforcement agency
	2. Corrections or other justice agency not included in option 1
	3. Social services agency
	4. School official, parent or guardian, or young person him/herself
,	5. Other (specify)
6.	Level of the agency that placed this person at this facility (select 1 code from list below)
	 Federal A Native American Tribal Government
	 A Native American Tribal Government State
	4. County
	5. Municipal (includes Washington, DC)
	6. Other (specify)
7.	Three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]. If the offense(s)
	was also a probation or parole violation, please check the box to the right of the code you entered. See
	the Offense Codes <link/> here for reference.
8.	State or territory where person committed the most serious offense listed in #7
9.	Person's adjudication status on [REF_DATE_SHORT] for the most serious offense listed in #7.
	"Adjudication" is the court process which determines whether or not the person committed the offense.
	(select 1 code from list below)
	1. Agreement not to adjudicate (diversion)
	2. Awaiting adjudication hearing in juvenile court

- 3. Adjudicated, awaiting disposition by juvenile court
- 4. Adjudicated and disposed in juvenile court and awaiting placement elsewhere
- 5. Adjudicated and disposed in juvenile court, in placement here
- 6. Awaiting transfer hearing to adult criminal court
- 7. Awaiting hearing or trial in adult criminal court
- 8. Convicted in adult criminal court
- 9. Don't Know
- 10. Other (specify)
- 9. Date person was admitted to this facility for the most serious offense listed in #7

S2_ROSTE	R			
ASK	If S1_COUNTCATS	5 (a) > 0 or missing		
<u><u>OR</u>assigned b adjudicate Do NO</u>	RTANT INSTRUCTIONS: Plea > enter information below for a beds in the facility on [REF_D ed for an offense. OT list persons assigned beds he when all persons have been ente	II <u>[fill S1_COUNTC DATE] specifically ere for reasons other</u>	ATS (a)value]<, because they	/u> persons under age 21 that were were charged with or court-
[button-U	PLOAD TEMPLATE]	OR	[buttor	-ADD A PERSON]
		l	button-FINISHE	D ADDING PERSONS]
Count	ID Number/Name	Sex assigned at	oirth	Date of Birth
1	[row populates after a new person is added]	[row populates of person is added]		[row populates after a new person is added]

S2_ROSTER_UPLOAD	
ASK	Respondents who choose File Upload
b>FILE UPLOADS Click the "Brow	wse" button to browse for the file you'd like to upload to our site.
• Select the file	you want to upload. bad File" button to start the uploading process.
Once your file	has been uploaded successfully the file name will appear in the box below. after you file has been uploaded.
Select File to Uploa [button-Browse]	ıd
[button-Upload file] No files have been uplo	baded
[button-Return to Sect	on II Instructions] [button-Submit]

S2_ROSTER_ADD	
ASK	Respondents who choose to Add a Person

- 1. Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.
- 2. Sex assigned at birth
 - 1 Male
 - 2 Female
- 3. Date of birth
- 4. Race
 - 1 White, not of Hispanic origin
 - 2 Black or African American, not of Hispanic origin
 - 3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)
 - 4 American Indian/Alaska Native, not of Hispanic origin
 - 5 Asian, not of Hispanic origin
 - 6 Native Hawaiian or other Pacific Islander, not of Hispanic origin
 - 7 Two or More Races, not of Hispanic origin (specify)
- 5. Who placed this person at this facility (select 1 code from list below)
 - 1 Court, probation agency, or law enforcement agency
 - 2 Corrections or other justice agency not included in option 1
 - 3 Social services agency
 - 4 School official, parent or guardian, or young person him/herself
 - 5 Other (specify)
- 6. Is the court, probation, or law enforcement agency, or other agency referred to in question 5 at the federal, tribal, state, county, or municipal level?
 - 1 Federal
 - 2 A Native American Tribal Government
 - 3 State
 - 4 County
 - 5 Municipal (includes Washington, DC)
 - 6 Other (specify)
- 7. What was the were the three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes <link>here</link> for reference.
- 8. In which state or territory did this person commit the most serious offense?
- 9. On [REF_DATE_SHORT], what was this person's court adjudication status for the most serious offense? "Adjudication" is the court process which determines whether or not the person committed the offense.
 - 1 Agreement not to adjudicate (diversion)
 - 2 Awaiting adjudication hearing in juvenile court
 - 3 Adjudicated, awaiting disposition by juvenile court
 - 4 Adjudicated and disposed in juvenile court and awaiting placement elsewhere
 - 5 Adjudicated and disposed in juvenile court, in placement here
 - 6 Awaiting transfer hearing to adult criminal court
 - 7 Awaiting hearing or trial in adult criminal court
 - 8 Convicted in adult criminal court

99 Don't Know10 Other (specify)

10. On what date was this person admitted to this facility for the most serious offense? If more than one date applies, enter the earliest one for the offense listed.

[button-Cancel] [button-Add Person]

END PAGES

ELIGIBILI	Y
ASK	If S1_COUNT (c) = 0 or S1_COUNT (a) =0
	your prior answer, what was the reason there was no one (if S1_COUNT (a) =0: under 21) with assigned ur facility?
1	Facility Permanently Closed – Specify reason and date of closure
T	
2	Facility Temporarily Closed – Specify reason and reopen date (if known)
-	Facility Temporarily Closed – Specify reason and reopen date (if known) Adult Only Facility – Specify when facility stopped holding juvenile offenders

BURDEN_ESTIMATE	
ASK	All Respondents
Thank you for participating in the 2021 CJRP pilot test. To help inform future CJRP data collection efforts, we would like to understand more about your experience filling out this questionnaire.	
About how many hours did it take you to complete this questionnaire? <i>Please include any time you spent gathering the necessary information.</i>	

COMMENTS		
ASK	All Respondents	
Please provide any comments you have about the data submitted on this form.		
Click the 'Submit Data' button below to finalize your survey. Once data has been submitted you will be locked out of the survey an unable to make any changes.		
[button-Previous]	[button- Submit Data]	
THANKYOU		
ASK	All Respondents	

Thank you for electronically submitting the 2021 Census of Juveniles in Residential Placement Pilot Study questionnaire.

If you have any questions, please contact 2021 CJRP Pilot Study help desk staff at [phone] or [email].