

**THE MISSOURI JUVENILE RISK ASSESSMENT**

JUVENILE NAME \_\_\_\_\_ JUVENILE ID \_\_\_\_\_  
 JUVENILE DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ SEX: \_\_\_\_ M \_\_\_\_ F SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 JUVENILE ACTIVE CASE ID \_\_\_\_\_

PRESENT OFFENSE CODE (List multiple offenses) \_\_\_\_\_  
 DATE REFERRAL RECEIVED \_\_\_\_/\_\_\_\_/\_\_\_\_ DATE FORM COMPLETED \_\_\_\_/\_\_\_\_/\_\_\_\_  
 COUNTY \_\_\_\_\_ CIRCUIT \_\_\_\_\_ JUVENILE OFFICER \_\_\_\_\_

**Age at 1<sup>st</sup> Referral**  
 16.....-2  
 15 ..... 0  
 14 ..... 0  
 13 ..... 0  
 12 and under.....1

**Prior Referrals**  
 None..... 0  
 One or more ..... 2  
 (Actual number of referrals\_\_\_\_\_)

**Assault Referrals**  
 No prior or present referrals  
 for assault..... 0  
 One or more prior or present  
 referral for misdemeanor assault..... 1  
 One or more prior or present referrals  
 for felony assault..... 2  
 (Actual number of referrals\_\_\_\_\_)

**History of Placement**  
 No prior out-of-home placement..... 0  
 Prior out-of-home placement ..... 1

**Peer Relationships**  
 Neutral influence..... 0  
 Negative influence ..... 1  
 Strong negative influence ..... 2

**History of Child Abuse**  
 No history of child abuse/neglect..... 0  
 History of child abuse/neglect..... 1  
 (Petition filed/DFS finding of  
 probable cause)

**Substance Abuse**  
 No alcohol or drug abuse problem..... 0  
 Moderate alcohol and/or drug  
 abuse problem ..... 1  
 Severe alcohol and/or drug  
 abuse/dependence ..... 2

**School Attendance/Disciplinatory**  
 No or only minor problems.....-1  
 Moderate problems ..... 0  
 Severe problems..... 1

**Parental Management Style**  
 Effective management style.....0  
 Moderately ineffective management  
 style ..... 1  
 Severely ineffective management  
 style .....2

**Parental History of Incarceration**  
 No prior incarceration.....0  
 Prior incarceration ..... 1

**RISK SCORE:**

**RISK LEVEL:**  
**8 & above = High Risk**  
**1 – 7 = Moderate Risk**  
**-3 – 0 = Low Risk**

**Motion to dismiss for  
 certification sustained:**

**Check action taken (one):**  
 \_\_\_\_\_ Informal Adjustment  
 \_\_\_\_\_ Formal Process/Adjudication

**Check all sanctions you used. A  
 Disposition or Sanction needs to be  
 applied within JIS**

\_\_\_\_\_ None  
 \_\_\_\_\_ Warned/Counseled  
 \_\_\_\_\_ Restitution  
 \_\_\_\_\_ Community Service  
 \_\_\_\_\_ Court Fees & Assessment  
 \_\_\_\_\_ Supervision  
 \_\_\_\_\_ Day Treatment  
 \_\_\_\_\_ Intensive Supervision  
 \_\_\_\_\_ Court Residential Placement  
 \_\_\_\_\_ Commitment to DYS  
 \_\_\_\_\_ Other: \_\_\_\_\_

**If you did not use a sanction  
 recommended by the matrix, check  
 one of the following reasons why:**

\_\_\_\_\_ Nature of the offense  
 \_\_\_\_\_ Severity of problems associated  
 with one or more risk factors  
 \_\_\_\_\_ Mitigating or aggravating  
 circumstances  
 \_\_\_\_\_ Judicial decision