STA	TE OF WISCONSIN, CIRCUIT COURT,	COUN	NTY	
IN THE INTEREST OF		Short Term Detention ☐ Pending Investigation		
Name		☐ As a Consequence		
Date of	Birth	Case No		
1.	The juvenile is subject to a current disp	ositional order having been adjudicated:	delinquent JIPS for	
2.	The dispositional conditions and possible sanctions, and the authority to take the juvenile into custody and hold without a hearing for up to 72 hours: were explained to the juvenile by the court at the dispositional hearing. were acknowledged in writing by the juvenile.			
3.	 I believe the juvenile: may have violated one or more of the terms of the dispositional order and should be taken into custody while the alleged violation and the appropriateness of a sanction is being investigated. has violated a condition of the dispositional order. is on aftercare and may have violated a condition of the aftercare status and should be taken into custody while the alleged violation and the appropriateness of revoking the juvenile's aftercare status is being investigated. has violated a condition of the aftercare order. 			
□ 4.	The juvenile being held as a consequence has been advised that he or she has the right to make a written or oral statement concerning the possible placement. The juvenile has declined to make a statement. The juvenile's statement is attached.			
	. The juvenile is to be taken into custody and held as follows: in juvenile detention (delinquency only) at in the juvenile portion of the county jail (delinquency only) at in non-secure custody (delinquency or JIPS) at			
6.		ovided byby		
7. The juvenile was taken into custody on [Date] at [Time] a.m. and the juvenile must be released 72 hours after this date and time unless the court conducts a he orders the hold continued.		a.m. p.m. pr.m. purt conducts a hearing and		
		▶ Sig	gnature	
DISTRIBUTION: 1. Court		Name Prin	Name Printed or Typed	
 Juv Juv Par 	enile's Guardian ad Litem/Adversary Counsel	Ac	ddress	
5. Dist 6. Cas	rict Attorney/Corporation Counsel seworker	Email Address	Telephone Number	
7. Fac 8. Fac	ility ility Transporter	Date	State Bar No. (if any)	