



**Department of
Youth Services**

County Call-In Form

Email: callindys@dys.ohio.gov

Phone: (614) 728-7093

Fax: (614) 728-4680

Commitment Called in:	Date: Click here to enter text.	Time: Click here to enter text.
Person completing DYS Call-In:	Click here to enter text.	
Phone number:	(Click here to enter text.) Click here to enter text. - Click here to enter text.	

Name of youth:	Last: Click here to enter text.	First: Click here to enter text.	Mid: Click here to enter text.
Date of Birth:	Click here to enter text.	SSN:	Click here to enter text.
Male:	<input type="checkbox"/>	Female:	<input type="checkbox"/>
Committing County:	Click here to enter text.	Commitment Date:	Click here to enter text.
Committing Offense(s) and/or Revocation:	Click here to enter text.		
Has this youth been in DYS before?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	If yes, DYS#: Click here to enter text.
Parent/Guardian Name:	Click here to enter text.	Phone:	Click here to enter text.
Street Address:	Click here to enter text.	City/State/Zip	Click here to enter text.
Suicide history/attempts/thoughts (explain):	Click here to enter text.		
Click here to enter text.			
Alerts: (gang activity, aggressive behavior, medical etc.):	Click here to enter text.		
Click here to enter text.			
Please do not list specific/confidential medical conditions on this form. Please notify the person accepting the DYS Call-In or contact the DYS Medical Department directly. Please send all medications and/or a list of all medications.			
IRJCF Medical:	Phone:	(330) 837-4211 ext. 2861 or ext. 2823	Fax: (330) 832-5247
CJCF Medical:	Phone:	(740) 477-2500 ext. 7180 Admn ext. 7178 RN	Fax: (740) 420-3734

For Internal Use Only:			
DYS Confirmation:	Phone: <input type="checkbox"/>	Fax: <input type="checkbox"/>	Email: <input type="checkbox"/>
DYS #:	Click here to enter text.	Admission Date:	Click here to enter text.
Youth Status:	New Commitment: <input type="checkbox"/>	Prior Commitment: <input type="checkbox"/>	Recommitment: <input type="checkbox"/> Revocation: <input type="checkbox"/>
Received by:	Name: Click here to enter text.	Signature:	Date/Time:

Safety & Security for Youth Processing:
<ul style="list-style-type: none"> • Call-Ins can be completed Monday through Friday from 8:00 AM to 2:00 PM the day prior to a youth admission • DYS can receive youth Monday through Friday from 8:00 AM to 5:00 PM