**State of Delaware Truancy**

**Truancy Filing Packet**

Revised: November 2, 2023

\*Please look over these instructions carefully.

*Complete the entirety of this document in Microsoft Word, then save and submit it as a PDF. Handwritten and/or incomplete submissions will not be accepted.*

*\*\*\*Remember\*\*\**

* DO NOT include more than one (1) filing in each email unless the cases are related.
* If you are filing a Truancy matter against multiple individuals in the same family, they must be included in a single email as separate attachments.
* DO NOT send more than one (1) filing in a single attachment.
* Submit all documents for one (1) filing in a single attachment. DO NOT send multiple attachments for a single filing.
* Save your attachments with the format: “[Defendant’s First Name and Last Name] – Truancy Filing”
* When submitting a filing, the email should be sent to FC\_Truancy@delaware.gov and JP Court Truancy staff in your county with a Subject Line of “Defendant’s First Name and Last Name – Truancy Filing”.
	+ If filing against a parent and child in the same email, you should format the subject line as “[Student’s First Name and Last Name] and Parent(s) – Truancy Filings.”

Failure to fill out all sections correctly will result in the Court returning the filing to you

for corrections. Your case will not move forward until you re-submit the filing.

**Exhibit B -**

In and For [ ]  New Castle County [ ]  Kent County [ ]  Sussex County

# Affidavit of Probable Cause

(To be completed by school official for as the Defendant)

|  |  |
| --- | --- |
| STATE OF DELAWARE VS |       |
|  |  |
| Student Name: |       |
|  | Age |       | DOB |       | Sex |  |
|  | Race |  | Ethnicity |  |
| Grade: |       | Number of Grades/Times Retained:  |       |
| Parent/Guardian Name: |       | Relation to Student |  |
|  | Age |       | DOB |       | Sex |  |
|  | Race |  | Ethnicity |  |
| Is an Interpreter needed for this case? [ ]  Yes [ ]  No Language: |       |
| Student/Parent Contact Information: |
| Home Address | (House Number and Street Name) |
|  | (City, State, Zip) |
| Phone [ ]  Home or [ ]  Cell |       |
| Email Address |       |
| [ ]  This filing is against a parent ONLY.[ ]  This filing is against a student only and the parent is being filed against at the same time OR the parent already has an open case regarding this student. *\*Please note: If the custodial parent does not have an active case and the student is 12 years old or older, you must file against the parent also.* |
| Your affiant has probable cause to believe that the above-named defendant committed a violation of the offense(s) listed in Exhibit A on the dates and the locations as shown there. This belief is based upon the following facts and circumstances as shown below. |
| Date offense occurred (time-period of unexcused absences): |       |
| Location where offense occurred (school name & address): |       |
|  |       |
|  County: |  |
| Facts and Circumstances: |
| (Type Details Here) |
| Violation of [14 *Del. C.* § 2702](https://delcode.delaware.gov/title14/c027/sc01/index.html) : |
|  |
|   | Select a Statute Above |       | days |
| (Defendant’s Name) |  | (# Unexcused Days) |
| resulting in the Truancy of  |   |
|  |  |
| I affirm that I have attached the following documents (check all that apply): |
| [ ]  Attendance Record | [ ]  Certified Letter (per [14 *Del. C.* § 2702(d)(2))](https://delcode.delaware.gov/title14/c027/sc01/index.html) |
| [ ]  Signed Contract (per [14 *Del. C.* § 2702(f)](https://delcode.delaware.gov/title14/c027/sc01/index.html)) | [ ]  Truancy Notice Letters  |
| *If you are unable to attach the Signed Contract, provide the reason below:* | [ ]  List of Witnesses (Optional) |
| (Type Details Here) |

# If other individuals need to be present for the hearing, please include their information with this filing on a separate document. Ex. Name, address, and phone number of witnesses needed for trial.

|  |  |  |
| --- | --- | --- |
| Affiant Information: |  |  |
| Phone: |       |
| Email Address: |       |
| School District: |       |
| Address: |       |
|  |       |
| County: |  |
|  |  |
| Affiant |       |  |       |
|  | (Print Name) |  | (Signature) |
| Date: |       |  |
|  |  |  |
| Sworn and Subscribed before me this |       | day of |       |  20 |       |
| Witness |       |