



COMPLETE THIS FORM IF YOU ARE 18 YEARS OF AGE OR OLDER AND ARE REQUESTING YOUR OWN JUVENILE RECORDS OR YOU ARE A PARENT OR LEGAL GUARDIAN REQUESTING JUVENILE RECORDS ON BEHALF OF A MINOR.

### Request for Juvenile Records

Please note that the Code of Virginia § 16.1-300 requires that juvenile records be kept confidential and may only be released to the individuals identified in the Code.

#### Section 1. Juvenile subject's information

Last name  First name  Middle name   
 Date of birth  SSN   
 Other names (aliases)

#### Section 2. Parent/Legal Guardian of Juvenile Subject (only required if subject is under 18 years old at the time of the request)

A parent or legal guardian may only request records for subjects who are under the age of 18 at the time of the request. Once the subject reaches the age of 18, the subject must submit their own request for records.

Last name  First name  Middle name   
 Relationship to minor

#### Section 3. Requested Records

In accordance with the applicable [Library of Virginia record retention schedules](#), the Virginia Dept. of Juvenile Justice only maintains juvenile records for a limited period of time. For example, juvenile offender history and juvenile case files are maintained until the subject turns 26 years old; behavioral services unit files are maintained until the subject turns 31 years old; and juvenile offender medical and dental records are maintained until the subject turns 27 years old. After the age of 31, only education records may be available.

Offense history       Court Service Unit records (e.g., diversion, probation & parole records)

**For subjects who were a resident in a juvenile correctional center, please select each category of requested records and sign below as necessary:**

Commitment records       Administrative & general records       Education and vocational records  
 Substance abuse records       Medical, dental & psychiatric records       Case management reports  
 Psychotherapy records       Mental health records       Sex offender treatment records

The Code of Virginia § 54.1-2969 requires minors over the age of 14 to give explicit consent to the disclosure of medical records. If the subject is over the age of 14 and medical records are being requested, the subject must sign here to indicate their consent to the release of such records.

Some medical, substance abuse, psychotherapy, and sex offender treatment records are protected by federal and/or state law from disclosure without the subject's consent. If any of these records are being requested, the subject must sign here to indicate their consent to the release of such records.

**Section 4. Requester's Contact Information and Preferred Method of Receipt**

Address   
Town/city  State  Zip code   
E-mail address

**Preferred method of receipt:**

By mail to the address above  Electronic copy or access via email or a web-based portal

**Section 5. Signature of Requesting Party (wet and electronic signatures are acceptable)**

This is a voluntary request. I am not requesting these records as part of an external research study. I enclose a copy of my driver's license, passport, or other government-issued form of identification.

Where the release of any requested records is protected by federal and/or state law as noted in Section 3, the subject has signed in Section 3 to indicate their consent to the release of such records.

Requester's printed name   
Requester's signature   
Date

Please submit completed requests by e-mail to [records.requests@djj.virginia.gov](mailto:records.requests@djj.virginia.gov), or by mail to the following address:

**Juvenile Record Requests  
Virginia Dept. of Juvenile Justice  
600 East Main Street, 20th Floor  
Richmond, VA 23218-1110**

Requests will be considered for up to a year after the date of signature.

For inquiries regarding record requests, please contact the juvenile record requests team at (804) 588-4414 or via e-mail at [records.requests@djj.virginia.gov](mailto:records.requests@djj.virginia.gov).