
In the Matter of

Docket No.

A Person Alleged to be a
Juvenile Delinquent

Respondent.

EXAMINATION REPORT.
(To Determine Capacity)

TO THE FAMILY COURT OF THE STATE OF NEW YORK COUNTY OF

a duly qualified psychiatrist

certified psychologist) hereby reports as follows:

1. I examined , , the Respondent herein, pursuant to an order of the
Court, dated , to determine whether Respondent is mentally ill
 intellectually disabled
on (date): at (location):

on (date): at (location):

2. Based upon the above examination(s), in-my professional
judgment, is is not
an incapacitated person as defined in subdivision (13) of section 301.2 of the Family Court Act.

*3. I base this opinion upon the following

a. Diagnosis

b. Prognosis

*(Note to examiner) If a finding of incapacity is made, you must complete items 3 and 4 of this form.

ement of the reasons for my opinion:

[Make particular reference to those aspects of the proceedings wherein Respondent lacks capacity to understand or to assist in defense.]

Dated:

Signature
**(Qualified Psychiatrist)
**(Certified Psychologist)

*Applicable if report finds Respondent to be an incapacitated person. Strike out one.