

AHM YOUTH SERVICES

JUVENILE REVIEW BOARD

REFERRAL / AGREEMENT

The undersigned complains that:				CASE NO.	
ON (Mo., Day, Year)	AT (Time)	IN (Offense Town)	TOWN CODE		
NAME (Last, First, Middle Initial)					
ADDRESS (No., Street and Town)					
STATE	DATE OF BIRTH	TELEPHONE NO.		RACE	SEX
EYES	HAIR	HEIGHT	WEIGHT	OTHER	
violated the following LAWS, ORDINANCES OR SCHOOL RULES:					
1.				STAT./ORD. NO.	
2.				STAT./ORD. NO.	
3.				STAT./ORD. NO.	
NAME, ADDRESS, PHONE NO. OF PARENT/GUARDIAN OR OTHER PERSON HAVING CONTROL OF THE CHILD					
NAME, ADDRESS, PHONE NO. OF PARENT/GUARDIAN OR OTHER PERSON HAVING CONTROL OF THE CHILD					
JUVENILE REVIEW BOARD AGREEMENT					
<p>We hereby request and agree that this matter be diverted to the AHM Juvenile Review Board instead of being referred to the Superior Court Juvenile Matters.</p> <p>We agree to immediately contact AHM Youth Services to initiate the intake process and to comply with the established procedures for handling such cases.</p> <p>We agree that the Juvenile Review Board will review this case and, if they accept it, will recommend and monitor supportive services and rehabilitative efforts on our behalf.</p> <p>We also understand that if the Juvenile Review Board handles this case, certain rights that I would have if this case went to court, such as the right to a lawyer and the right to have a trial, will not be available.</p> <p>We further understand and agree that if the Juvenile Review Board does not accept this case, or if the recommendations of the Juvenile Review Board are not followed, the case may be referred to the court for prosecution. If this or any future case is referred to the court, information regarding my involvement with the Juvenile Review Board will be shared with the court.</p>					
_____ (Signature of Child)			_____ (Signature of Parent/Guardian)		
_____ (Date)			_____ (Date)		
YOU ARE TO CONTACT AHM YOUTH SERVICES AT 228-9488 WITHIN 48 HOURS					
SIGNED (Trooper or Principal)					
POLICE DEPARTMENT/SCHOOL			BADGE NO.		DATE
<p>State Police: send the white copy of this ticket to AHM Youth Services, 25 Pendleton Drive, Hebron, CT 06248.</p>					

Distribution: White-AHM • Canary-Police • Pink-Youth