

IN THE YOUTH COURT OF _____ COUNTY, MISSISSIPPI

IN THE INTEREST OF

MYCIDS#: _____

, A MINOR

(DOB: _____)

Docket #: _____

PROBATION CONTRACT

I, _____ understand that I have been placed on probation by the _____ County Youth Court for _____ months. To complete my probation, I must:

1. _____ Come to Court when told to do so.
2. _____ Come to meetings with the Youth Services Counselor, court staff, or appointed volunteers as part of probation.
3. _____ Live with _____, my parents, custodians, or guardians, and obey their rules. I must make sure that my parents or guardians know where I am at all times and have their permission to leave home. If I am placed on house arrest, my Youth Services Counselor will explain the rules for that program at that time.
4. _____ Follow curfew and be home and stay there. Sunday through Thursday nights from _____ p.m. until _____ a.m. and Friday and Saturday nights from _____ p.m. until _____ a.m.
5. _____ Notify my Youth Services Counselor within twenty-four (24) hours of any change in phone number, address, residence or school.
6. _____ Not leave the State without the permission of my Youth Services Counselor.
7. _____ Attend school every day while school is in session, unless I have an excuse accepted by the school district. If I am suspended or expelled, I must attend an educational program approved by the Mississippi Department of Education or an alternative program approved by the court. I understand that I must follow all rules of the school.
8. _____ Not use any alcohol or drugs, except those that a doctor or dentist prescribes for me.
9. _____ Give a urine sample to test for drugs or alcohol whenever asked to do so as part of probation.
10. _____ Not break any laws.

March 15, 2020	Policy 40 Probation	Attachment A
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11. _____ Stay away from the following places: _____

12. _____ Not contact, talk to, or send messages by mail, phone, email, text messaging, through social media, through any internet or smart phone based program, through other people, or by any other way with the following persons: (Victims and other people identified by the court) _____

13. _____ Not carry any guns, knives, or other weapons.

14. _____ Meet and cooperate fully with my Youth Services Counselor, _____. The next scheduled appointment is:

Date of Appointment	Time	Place of Appointment
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15. _____ Attend and complete the following programs:

Name	Place
_____	_____
_____	_____
_____	_____

16. _____ Complete _____ hours of community service by working at a site approved by the court or Youth Services Counselor.

17. _____ Pay restitution in the amount of \$ _____ as ordered by the Court. Payment shall be made through the Court Clerk's Office as follows: _____

18. _____ Obey the following rules and restrictions placed on me by the Court: _____

REVOCAION AND CONTEMPT:

If I do not follow the Court's Orders or the rules in the Probation Contract, I may be brought back to the Court. I can be charged with violating the conditions of my probation and face possible revocation of my probation or be charged with Contempt of Court. I understand that I can challenge a Revocation of Probation or Contempt of Court charge and that during that challenge, I have the right to be represented by an attorney.

ACKNOWLEDGMENT:

As _____'s parent(s), custodian(s) or guardian(s), we understand that we have a duty to act in good faith in seeing to it that our child follows the Court's Orders and this probation contract and that we must report violations to the Youth Services Counselor within twenty-four (24) hours. Our duty includes bringing our child for drug or alcohol testing, if required by the Youth Services Counselor, and paying the costs of any tests. Failure to do so may result in our child being brought before the court.

_____ YOUTH	_____ DATE
_____ MOTHER	_____ DATE
_____ FATHER	_____ DATE
_____ GUARDIAN/CUSTODIAN	_____ DATE
_____ JUDGE (optional)	_____ DATE
_____ YOUTH SERVICES COUNSELOR	_____ DATE

I RECEIVED A COPY OF THIS SIGNED CONTRACT ON _____
DATE

YOUTH

THIS IS TO ACKNOWLEDGE THAT THE CONDITIONS AS STATED ABOVE HAVE BEEN COMPLETED AND THE ABOVE YOUTH IS RELEASED FROM PROBATION WITH THE _____ COUNTY YOUTH COURT.

DATE

YOUTH SERVICES COUNSELOR