



**PARTICIPATION AGREEMENT – RELEASE of INFORMATION – SERVICE PLAN**

**Conflict Resolution Center**

**Restorative Circle/**  **Teen Court Programs**

**TRUANCY**

School Name: \_\_\_\_\_ Grade # \_\_\_\_\_ IEP:  Yes  NO

**Parent/Guardian:** I, (Parent/Guardian Name) \_\_\_\_\_, having legal custody of (Youth Name) \_\_\_\_\_, grant my permission for them to participate in the **Restorative Justice Program (RJC)** with the **Conflict Resolution Center (CRC)**. I understand the staff, volunteers, and peers involved in the program will be citizens from the local community. In order for my child to benefit from his/her participation in the RJP, I understand that my active involvement is necessary. **By signing this form, I agree to support my child by ensuring he/she completes all activities agreed upon in the Repair Agreement or Jury Verdict.**

**Youth:** I, (Youth Name) \_\_\_\_\_ understand that my participation in the RJP depends primarily on my willingness to take responsibility for the harms that my actions have caused, and I agree to make a sincere effort to repair those harms by voluntarily participating in the RCP. **I also agree to complete all activities agreed upon in the Repair Agreement or Jury Verdict.**

**Reasons for Return**

I understand that if it is suspected that I am under the influence of drugs and/or alcohol during any scheduled event in the RJP program, my case may be returned to the referral source. I further understand that I cannot bring alcohol, weapons, or illegal substances to any RJP event and a violation of this provision will result in my case being returned to the referral source.

**I understand that the CRC may return my case to the referring agency for any of the following reasons:**

- Failure to accept responsibility for the harms caused my actions at any time during my participation in the RCP.
- **Failure to attend any scheduled meeting or Circle/Teen Court session with the CRC.**

**CONSISTENT LACK OF COMMUNICATION OR TRANSPORTATION**

- ~ **Not responding to texts, phone calls, or emails within 24 hours**
- ~ **Failing to transport youth to required meetings, community service or any other event.**

- Inappropriate behavior while participating in the program, including intake, the Circle/Teen Court, any activity that is part of the Repair Agreement or Jury Verdict, and any interactions with CRC personnel.
- **Failure to complete all Repair Agreements or Jury Verdict items by the agreement due date** (within 60-90 days of the Circle/Teen Court date). Any exceptions should be agreed to ahead of time with the Program Manager.
- **Commission of a subsequent violation prior to completion of the program.** (CRC to be immediately notified)

**I/we understand that I/we am responsible to arrive on time and attend the conference on the date scheduled. If I/we need to reschedule, for any reason, I/we must do so three (3) days before my scheduled conference after that I/we may not reschedule. If I/we do not attend my scheduled conference or if I/we are more than 15 minutes late, the matter may be returned to the referring agency.**

**Confidentiality-**  I/we agree to hold all communication and information I become privileged to during the restorative justice conference or Teen Court session in strict confidence. I/we understand that this confidentiality policy allows the participants of the conference, including myself, to speak freely and honestly about the events surrounding my case and other related matters. (\*Exception: Any statement about the intent to commit a felony or cause serious bodily harm by any conference participant may be reported to the appropriate law enforcement or other agency).

**Release of Case Information -**  I/we authorize the CRC to assign my case to a CRC Program Staff Team. I/we further authorize the CRC to provide those team members with access to my case file solely for purposes related to the conference, which includes sharing pertinent information from my case with other Circle/Teen Court participants, such as victims and affected community members, as deemed necessary for facilitation of the Circle/Teen Court session. I/we authorize the CRC to utilize any information pertaining to my case on an anonymous basis for the purpose of research, evaluation, and publicity.

## Individual Service Plan

Why are the services of the  Restorative Circle  Teen Court program needed?

Reason(s) for the Referral to the program:

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**What would you like to accomplish while participating in this program?**

My Goal 1. \_\_\_\_\_

Goal 2. Do my best to complete this program successfully.

**How important is it for you to finish successfully?**       Very     Somewhat     Not important

I/We will cooperate with staff and consider their suggestions for improved behavior and resolving the issues referred for service.

**The program will offer to the participant/family the following services:**

**Program Services/Interventions:** Help to accomplish goal(s) of Individual Plan of Care as established in Restorative Circle/Teen Court program guidelines. **Note: Truancy cases will require a plan to attend school on a regular basis.**

Help completing Student Guide/Workbook, through teacher instruction, in-class practice, behavioral homework, and feedback on the development of important interpersonal and social skills (such as, pro-social decision making, risk-taking, healthy habits, anger management and conflict resolution skills). Creating plans of action for completion of sanctions/consequences from Teen Court verdict or Circle Repair Plan and follow up monthly.

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**How often is it anticipated that the youth will participate in program activities?**

Frequency of Contact: A minimum of two (2) Circles & Complete Repair Plan  
or 1 Teen Court session and Complete Jury Verdict sanction(s)

**How long is it anticipated that the services of the program will be needed?** Length of Service: 60 to 90 days

**How often will youth's progress be monitored and service plan evaluated?** Every 30 days while in the program

**How will youth's progress be measured?** Through review of youth's school attendance record, disciplinary reports and student academic record, input/feedback from referring source and/or parents and staff interactions.

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**I/we have reviewed this information with a staff member of the Conflict Resolution Center and agree to its terms.**

\_\_\_\_\_  
Youth's Name (print)

\_\_\_\_\_  
Youth's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's/Guardian's Name (print)

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CRC Staff (print)

\_\_\_\_\_  
CRC Staff Signature

\_\_\_\_\_  
Date