

ORDER OF PROBATION SUPERVISION

JD-JM-116 Rev. 1-22
C.G.S. §§ 46b-140, 46b-141d;
P.A. 21-104

STATE OF CONNECTICUT
SUPERIOR COURT
JUVENILE MATTERS
www.jud.ct.gov



**This form is available
in other language(s).**

Address of court	CMIS Client number	Docket number
Name of child		Date of birth
Address		Probation Officer
Parent/Guardian		Address (<i>If different from child</i>)
Period of probation	Juvenile residential center/lockup time credit earned	Probation until (<i>Date</i>)
		Probation extended until (<i>Date</i>)

Having been adjudicated as a delinquent, the child is placed on probation supervision until the date shown above and must obey the following orders:

1. Do not violate any Federal, State or Municipal law or ordinance.
2. Remain drug and alcohol free.
3. Reside with Parent/Guardian or _____ and obey the rules of the residence.
4. Do not leave the state of Connecticut without notifying and obtaining permission to leave from your probation officer.
5. Notify your probation officer of any change of address or phone number within 48 hours.
6. Keep all appointments scheduled by your probation officer, evaluators or therapists.
7. Obey any graduated responses ordered by your probation officer.
8. Attend school and class on a regular basis and follow school policies on student conduct and discipline.
 Attend technical or vocational training, or both.
 Make a good faith effort to obtain and maintain employment.
9. **Other Conditions**
 - Cooperate with Department of Children and Families and/or CSSD placement and/or programs.
 - Undergo any court ordered medical or psychiatric evaluation or treatment.
 - Submit to periodic alcohol and drug testing and assessment and participate in treatment (*community or in-patient*) for substance abuse as deemed necessary by your probation officer.
 - Initiate no contact with victim(s).
 - Curfew _____ (*time*) Electronic Monitoring from: _____ until: _____
 House Arrest from: _____ until: _____
 - Submit a sincere letter of apology to your probation officer by _____ (*date*).
 - _____ Hours of Community Service to be completed by _____ (*date*).
 - Participate in a youth service bureau program.
 - Pay restitution in the amount of _____ payable to CSSD, Restitution Unit, 455 Winding Brook Drive, Glastonbury, CT 06033, by bank check or money order by _____ (*date*).

Special conditions:

Notice: At any time during the period of probation with supervision, the court may modify or add conditions, whether originally imposed by the court under this section or otherwise and may extend the period as the court deems appropriate after hearing and for good cause shown. Your probation officer may inform the police of these conditions.

Name of Judge (*Print or type*)

Signed (<i>Judge/Clerk</i>)	Date of order	Date signed
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**I have read and understand the above orders (as further explained on page 2).
If I do not obey these orders, I can be placed in a juvenile residential center and/or a secure facility.**

Child	Date signed
Parent/Guardian/Witness	Date signed
Probation Officer	Date signed

Plain language summary of the orders of probation supervision:

I am placed on probation supervision until _____ . I must follow these orders:

The time that I will be on probation supervision has been extended until: _____

1. I cannot commit any crime or delinquent act.
2. I cannot use any alcohol. I cannot use any drugs that a doctor did not prescribe for me.
3. I must live with Parent/Guardian or _____ . I must follow the rules where I live.
4. I must get permission from my probation officer to leave Connecticut.
5. I will tell my probation officer in less than 2 days if I move or change my phone number.
6. I must go to all appointments I am told to go to by my probation officer.
7. I will follow other rules set by my probation officer.
8. I will go to school regularly and go to class. I will follow all school rules.
 I will go to technical or vocational training.
 I will look for a job.
9. **Other conditions of my probation. I will:**
 cooperate with the Department of Children and Families and/or CSSD placement and/or programs.
 go to counseling (type)
 be tested for alcohol and drugs if my probation officer says so.
 go for drug or alcohol treatment if my probation officer says so.
 not contact the victim(s) in any way.
 be at home during the hours of _____ (time) I will wear an Electronic Monitor from: _____ until: _____
 House Arrest from: _____ until: _____
 write a letter saying I'm sorry by: _____ (date).
 complete _____ hours of Community Service by _____ (date).
 go to a youth service bureau program.
 pay money back to fix any damage I caused in the amount of _____ to CSSD, Restitution Unit, 455 Winding Brook Drive, Glastonbury, CT 06033, by bank check or money order by _____ (date).

I must also do these things:

Notice: At any time during my probation supervision, the court may change or add conditions and make my probation last longer. Your probation officer may tell the police of these conditions.

I have read and understand the above orders. If I do not follow these orders, I can be placed in a juvenile residential center or other placement.