

DIVERSION AGREEMENT

The following will apply if you are recommended to participate in diversion, and if the Douglas County Attorney approves a diversion plan:

I understand that participation at the JAC and participation in Diversion is voluntary. I also understand the County Attorney reserves the right to file on this particular event if I do not complete the Diversion program.

I agree to the following terms and conditions to avoid prosecution on these charges:

- Obey all laws. Additional law violations may result in the County Attorney filing these charges and the new charges in Juvenile Court.
- Maintain contact with my Juvenile Service Specialist as agreed upon by myself and my Specialist.
- I must remain satisfactorily enrolled in school. My attendance, grades, and behavior will be monitored.
- Abstain from the use of alcohol, drugs, and tobacco. I may be asked to submit to a drug screening. Results of the drug screening will not be used for criminal prosecution, but may be cause for termination of Diversion.
- Complete any special condition the County Attorney approves for me. This can include any programs or services which will help to support my identified risk areas and needs.

My JAC Juvenile Service Specialist will mail to my home address my Individualized Diversion Plan upon approval by the County Attorney.

I have read this agreement and understand the terms and condition. I understand this agreement is subject to final approval by the Douglas County Juvenile County Attorney. I will be notified by mail if the County Attorney does not approve this agreement.

Signature of Juvenile

Date

Signature of Parent/Guardian

Date

JAC Specialist

Date

PARENTAL AGREEMENT

The following will apply if your child is recommended to participate in diversion, and if the Douglas County Attorney approves a diversion plan:

I understand my child is being given the opportunity to participate in Diversion instead of having the case go to formal Court processing. I understand that the County Attorney reserves the right to file or refile this matter if my child does not complete the Diversion Program.

I agree to:

- Support my child during the Diversion period
- Communicate in an effective way with the Juvenile Service Specialist, as well as with any recommended Service Providers, and with formal and informal supports. If you move or change phone numbers, it is your responsibility to let the Specialist and Service Providers know.
- Assist my child in completing their individualized plan. This may include registering my child for a class. Participating in an intake process for counseling, assisting with community service, etc.
- I understand there may be a cost associated with some of the diversion activities. If my child is approved to participate in a class in the community, the community-based agency (Service Provider) will charge a fee. These fees are determined by the Service Provider agencies. Most agencies offer a sliding or reduced fee if needed. I also understand I am responsible for transportation. Any difficulties with cost or transportation must be reported to the Specialist in order to quickly work through challenges in order for my child to be successful with their diversion plan.
- I understand that the JAC Juvenile Service Specialist will maintain an overview of my child's Diversion participation, and that my and my child's main communication will be with the Service Providers and supports in place to help my child learn and grow through this process.

Signature of Parent/Guardian

Date

Signature of JAC Specialist

Date