

Department of Children and Families
JUVENILE SERVICES – EXPECTATIONS OF PLACEMENT

DCF-066
11/08 (Rev.)



Client Name: _____ Date of Placement: _____

DOB: _____ DOC: _____ Commitment End Date: _____

Parole Services Officer: _____ Phone _____

The Commissioner of Children and Families or his/her designee, having reviewed and considered your case, has decided to place you at:
Name of Placement: _____

No and Street Address: _____ City/Town: _____ State: _____ Zip: _____

Although you are not yet on parole while at this placement, you have been assigned a Parole Services Officer who will help you adjust to your new placement and help prepare you for eventual transition to parole status. Whenever problems arise, or you do not understand what is expected of you while in placement, you may consult with your Parole Services Officer, who will assist you.

If at any time you believe your placement is not meeting your treatment needs, you may request a Treatment Plan Hearing, by writing to the Commissioner of DCF, specifically stating the elements of your treatment plan with which you are not in agreement. You are encouraged to request a Treatment Plan Hearing rather than leaving a placement without permission and accruing additional charges by doing so.

EXPECTATIONS:

1. You must obey the rules and requirements of the above-named placement and comply with treatment recommendations.
2. You must return to the above-named placement as scheduled and at the appointed time, from any passes or furloughs, and you must not leave the above-named placement without first obtaining permission from: _____
3. You must at no time own, possess, use, sell, or have under your control any weapon or firearm.
4. You must not use, possess or control, any illegal drug, narcotic or intoxicating substance. (marijuana, cocaine, heroin, Ecstasy, LSD, etc.)
5. You must not use, possess, or control any form of alcoholic beverages.
6. You must not use, possess or control any legal prescription medication unless prescribed for you by a licensed physician
7. You must attend school and all scheduled classes. If you are suspended from school you must immediately notify your Parole Services Officer. If you are officially withdrawn from school with parental/guardian permission, or have completed school, you must cooperate with alternative programming or maintain employment.
8. You must not violate any law, statute, regulation, or ordinance of the United States, State of Connecticut, any other state, county, city, town or municipality. If you are arrested, you must notify your Parole Services Officer immediately!
9. You must maintain contact with your Parole Services Officer and comply with the following Special requirements:
 - A. You must comply with random drug screening by Parole Services or its designee
 - B. _____
 - C. _____
 - D. _____

I have read, or have had read to me, the expectations and I fully understand them and agree to abide by and strictly follow them.

I also understand that I may nevertheless be returned to any institution, resource, or facility of the Department of Children and Families if, in the opinion of the Commissioner or his/her designee, it is no longer in my best interest to remain at the current placement.

Client Signature

Date

Witness Signature

Date

Distribution:

- Copy to Client
- Copy to Facility
- Copy to Guardian
- Copy to Parole Officer
- Copy to Records