ATTORNEY OR PARTY WITHO	OUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.:	FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
CHILD'S NAME:		
	INFORMAL PROBATION AGREEMENT	CASE NUMBER:

This agreement is a **CONTRACT** between the probation officer, the above named child, and his or her parent or parents or legal guardian.

The agreement is for up to six (6) months, and during that period and for up to 90 days after that, the probation officer has the right to request that the district attorney file a petition in juvenile court to have the child declared a ward of the court if the child does not successfully complete the terms of the program described below. If within the first 60 days after this agreement is signed, the child does not become involved in the program, the probation officer MUST take the necessary steps to bring the case before the juvenile court.

## TERMS AND CONDITIONS OF THE PROGRAM

The child	d must (check all that apply to this child):
1.	Report to the probation officer times each month until or unless directed differently.
2.	Obey all city, county, state, and federal laws and ordinances.
3.	Obey his or her parent or parents or legal guardian.
4.	Attend school regularly, obey school rules and regulations, and not leave the school campus during school hours without permission of school officials or the probation officer.
5.	Not use, possess, or be under the influence of any alcoholic beverage or illegal or intoxicating substance, or possess any associated paraphernalia.
6.	Not use, possess, or be under the influence of the following (specify):
7.	Not possess, own, or handle any firearm, knife, weapon, fireworks, explosives, or chemicals that can produce explosives.
8.	Not contact or associate with
9.	Not be a member or associate with any known members of any criminal street gang.
9	Not be a member or associate with any known members of any criminal street gang.  Participate in individual, group, or family counseling, as directed by the probation officer.
10.	Participate in individual, group, or family counseling, as directed by the probation officer.  Submit to chemical testing in the form of, but not limited to, blood, breath, urine, or saliva on the direction of the probation
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JV-622 CHILD'S NAME: CASE NUMBER: Be at his or her place of residence between the hours of \_\_\_\_\_\_ p.m. and \_\_\_\_\_ a.m. unless with a parent or legal guardian or with the prior permission of the probation officer. 15. 20. I have read and understand the terms and conditions. I consent to them and promise to follow them and to cooperate with the probation officer. I understand that if I do not follow the terms and conditions, I may have to go to juvenile court. I have received a copy of this agreement. Date: (TYPE OR PRINT CHILD'S NAME) (SIGNATURE OF CHILD)

I am the parent legal guardian of the chi cooperate with the probation officer and to assist the chil	ld, and he or she has agreed to the terms of this agreement. I agree to d to follow the terms and conditions.
Date:	
	<b>&gt;</b>
(TYPE OR PRINT NAME)	(SIGNATURE OF PARENT/LEGAL GUARDIAN)
Date:	
	<b>&gt;</b>
(TYPE OR PRINT NAME)	(SIGNATURE OF PARENT/LEGAL GUARDIAN)
Date:	
	<b>&gt;</b>
(TYPE OR PRINT NAME)	(SIGNATURE OF PARENT/LEGAL GUARDIAN)