



RYASAP BRIDGEPORT JUVENILE REVIEW BOARD
CONTRACT / RELEASE OF INFORMATION

Agreement to refer the case to the Juvenile Review Board and Release of Information (For use in cases referred by the YSB.)

By signing below, I consent (agree) to have the Youth Service Bureau (YSB) refer my child to the Bridgeport Juvenile Review Board. I understand that I do not have to agree to do anything that the Juvenile Review Board suggests. I also understand that the Juvenile Review Board does not have to accept the referral if it does not meet their program's criteria.

I give consent for the Case Manager who works on behalf of RYASAP's Juvenile Review Board to speak to and receive information from any YSB staff including any referral or intake paperwork which may include the Ohio Scales screening tool.

We agree to meet with the Juvenile Review Board, answer any questions they have of us/my child and actively participate in the creation of an agreed upon plan. This plan will include recommendations or interventions which will help my child repair the harm done by their actions and be connected with any necessary supports and services within the community.

Child's/Youth's signature

Date

I (We) agree and consent to the terms of the above Contract/Release of Information.

Parent/Guardian's signature

Date

Parent/Guardian's signature

Date

Witness' signature

Date

This release expires on _____

RYASAP's programs include:

Connecticut Juvenile Justice Alliance • Juvenile Review Board • MYO AmeriCorps • Prevention & Wellness
Public Allies Connecticut • Restorative Justice • Safe Asleep • StreetSafe Bridgeport

REGIONAL YOUTH ADULT SOCIAL ACTION PARTNERSHIP

2470 Fairfield Avenue, Bridgeport, CT 06605 • phone: 203-579-2727 • fax: 203-333-9118
website: RYASAP.org