

Lesson 10 – Challenging Probable Cause and Detention

Sample Conditions of Release Form

No.	DO'S	No	DON'TS
<input type="checkbox"/> 1	I will come to court and go to all meetings scheduled by the court for my case(s).	<input type="checkbox"/> 13	I will not leave the house without an approved
<input type="checkbox"/> 2	I will call juvenile court (509) ---/--- on ___/___/12 to find out if the prosecutor filed a charge against me. If I am told that the prosecutor filed charges against me then I have to come to court on ___/___/12 at ___ am/pm.	<input type="checkbox"/> 14	I cannot leave the house by myself unless I am going to school or work.
<input type="checkbox"/> 3	I will call my lawyer. I will meet with my lawyer when he/she tells me.	<input type="checkbox"/> 15	I will NOT travel outside Benton or Franklin Counties without permission
<input type="checkbox"/> 4	I will live with _____ and obey all their rules.	<input type="checkbox"/> 16	I will NOT drink or have alcohol. I will NOT use or have drugs that were not given to me by my doctor.
<input type="checkbox"/> 5	I will follow Curfew and be home and stay there: <input type="checkbox"/> Every night from ___ p.m. until ___ a.m. <input type="checkbox"/> Sunday to Thursday from ___ p.m. until ___ a.m. <input type="checkbox"/> Friday and Saturday from ___ p.m. until ___ a.m.	<input type="checkbox"/> 17	I will not commit any crimes or get arrested.
<input type="checkbox"/> 6	I will report to any probation counselor assigned to me and obey his or her rules: Address: Benton/Franklin Juvenile Court, Kennewick, WA 99336. Phone: (509) 783-2151 I will attend all meetings set by my probation counselor and I will be on time.	<input type="checkbox"/> 18	I will NOT commit any crimes or get arrested. I will have NO CONTACT with the following persons; a. Name _____ DOB: _____ b. Name _____ DOB: _____ c. Name _____ DOB: _____ d. Name _____ DOB: _____ <i>This means I will NOT talk to or send messages by mail, phone, email, text message, or through the</i>
<input type="checkbox"/> 7	I will give a urine sample to test for drugs or alcohol when my probation counselor asks me to.	<input type="checkbox"/> 19	I will NOT be alone with children 2 or more years younger than me. If I am around children I MUST have a parent and/or approved adult who knows about what I have been accused of and the rules the judge gave me.
<input type="checkbox"/> 8	I will go to school every day. I will have no unexcused absences, suspensions or expulsions	<input type="checkbox"/> 20	I will NOT have, look at or listen to anything that shows or describes any sexual acts. I will NOT have or look at anything that shows or describes the uncovered private parts of the human body.
<input type="checkbox"/> 9	I will keep working at the job I have right now. I have to tell my probation counselor if anything changes with my job.	<input type="checkbox"/> 21	I will NOT have or use any guns or knives.
<input type="checkbox"/> 10	I will stay home. I am allowed to leave the house to come to court.	<input type="checkbox"/> 22	I will NOT associate or be a part of any criminal street gang, in person, by mail (including email), or by telephone.
<input type="checkbox"/> 11	I will get permission from my probation counselor each time I want to leave the house.	OTHER:	
<input type="checkbox"/> 12	I will always have a responsible adult with me while I am at home. If I do have to be home alone I will first get permission from my probation counselor.		
I understand all the things the judge has ordered me to do, which I have checked above, and I agree to obey them and any other rules given by the judge and my probation counselor.			
Signature: _____		Date: _____	

JTIP Supplemental Materials
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