WESTMORELAND COUNTY YOUTH COMMISSION
RIGHTS FORM

Youth Commission

(YC Name)

Juvenile's Name: DOB:

Your case was referred by: ☐ Westmoreland County Juvenile Probation Department

☐ District Justice

☐ Police Department

☐ Other:

You are here because you are a minor and have accepted responsibility for your actions: specifically,

,_ which is a

Summary Offense ☐ Dependent Act ☐ Delinquent Act ☐

This proceeding is for disposition purposes only. You have already accepted responsibility for your actions. The information we will be gathering includes:

- Obtaining facts of the incident
- Any mitigating circumstances
- Parental input concerning the child's actions relative to the incident
- Information from the youth concerning the incident

You do have the right to have this proceeding stopped at any time. You also have the right not to make any statements regarding the case. Either of these actions will result in your case being sent back to the referring agency. You have the right to have an attorney present to consult with, if you so desire.

Do you, the Parent/Guardian and Minor, understand these rights and the purpose of this proceeding?

Yes ☐ No ☐ Parent/Guardian
Yes ☐ No ☐ Minor

Do you with to continue with this proceeding?

Yes ☐ No ☐ Parent/Guardian
Yes ☐ No ☐ Minor

I agree to have my case heard before the Youth Commission for disposition purposes. I also understand that upon successful completion of my term of supervision all records being held by the commission will be appropriately destroyed.

Signature of Parent/Guardian: _____ Date: _____

Printed Name of Parent/Guardian:

Address:

Phone:

Signature of Juvenile: _____ Date: _____

Commission Member reading rights: _____ Date: _____