## AFFIDAVIT OF VIOLATION (TO BE COMPLETED BY PARENT/GUARDIAN)

All parents or guardians are required by any Probation Order (entered at disposition) to notify the Court <u>in writing</u> of any violation by the child/defendant of that Order. This notice to the Court is to occur immediately upon the parent/guardian witnessing or learning of a violation. You may use this form for making said written report.

Child/Defendant's Name:	(	Case No.:	
Child can be located at:			
I am the ( ) parent ( ) guardian ( ) of the Court's supervision order, I hereby report school ( ) elsewhere		ove-named child/defendant. Pursuant to my committed the following acts: ( ) at home (	
(Check all that apply)	<u>Date</u>	(Check all that apply)	<u>Date</u>
Law Violation, to wit:  Defiance Disrespect Aggressive behavior or threats Positive test for alcohol or drugs Possession or use of alcohol or drugs Smoking or possession of cigarettes or tobacco products Violation of "No Contact" provision by associating with: Violation of house arrest Violation of curfew Violation of household rules Disregarding program or school rules or policy Disruption of Program or School Unexcused absence from Program Unexcused absence from School		Tardiness at School Use of Profanity Absence from or leaving of program or class during program or class hours without permission Leaving program or school grounds during program or school hours without permission Failure to take prescribed medications Failure to complete or participate in required work or activities Absconded from supervision Failure to attend scheduled assessment/evaluation/meeting/ counseling session Other Violation:	
Names of witnesses to said violation(s) (indicate	ate whether studer	nt, teacher, resource officer, etc.)	
The child is doing well in the following areas:			
Under penalties of perjury, I declare that I have	e read the foregoi	ng document and the matters stated in it are tr	rue.
Date:	Signed: _		
	Printed N	ame:	
Sworn to and subscribed before me this	Address:		
day of, 20	. Phone No	).	
	Relationship to Child:		
Deputy Clerk/Notary		mp to ormu.	
My commission expires:	· Dereonally Know	or Produced Identification	(check
			(СПЕСК
one) Type of Identification Produced:			
Original to: Clerk of Circuit Court, Juvenile Division	Copy to: Department of Juvenile Justice Probation Officer		

Clerk of Circuit Court, Juvenile Division 125 East Orange Ave. Room 101 Daytona Beach, Fl. 32114 FAX: 386-248-8165 Department of Juvenile Justice Probation Officer 210 N. Palmetto Avenue Daytona Beach, Fl. 32114 FAX: 386-238-4605