

**OFFICE OF JUVENILE JUSTICE
CODE OF CONDUCT VIOLATION REPORT**

ACY
 SM
 BCCY
 SCY
 SCYC

1. Name of Youth: [REDACTED]		2. CLIENT ID# [REDACTED]		3. Date of Incident: 1-20-22		4. Time of Incident: 7:10 AM	
5. Place of Incident: ACY SM			6. Job/School Assignment (Youth): [REDACTED]		7. Housing Assignment (Youth): DELTA-POD		
8. Violation: ESCAPE					9. Violation Number: 5		
10. Was the violation a result of an IS video review? <input checked="" type="radio"/> YES <input type="radio"/> NO							
11. DESCRIPTION OF BEHAVIOR (Include all relevant information - "usual youth behavior, staff witnesses, physical evidence & disposition, immediate action including the use of interventions"; use supplement if necessary) YOUTH [REDACTED] BROKE CONCRETE CENTER BLOCKS IN HIS CELL D-1 AND ESCAPED AROUND 7:47 PM ON 1-19-22 BY CLIMBING THE EAST CORNER FENCE.							
12. Signature of reporting employee: [Signature]				13. Name, Title, Assignment (PRINT): Randy Booth JR / Shift Commander			
14. Date of Report: 1-20-22		15. Time of Report: 7:10 AM		16. Report (copy) given to Youth by: NO		17. Youth's Signature: N/A	
18. Youth Refused or is Unable to Sign Report: <input type="radio"/> YES <input checked="" type="radio"/> NO				19. Reason youth refused or is unable to sign: ESCAPED			
20. Does youth want a staff representative at his hearing? <input type="radio"/> YES <input checked="" type="radio"/> NO If YES, Who? UNK		Witness Signature: [Signature]		Witness Signature: Dawn Bunnay			
21. Youth Advised of Rights? <input type="radio"/> YES <input checked="" type="radio"/> NO				22. Youth Understand Rights? <input type="radio"/> YES <input checked="" type="radio"/> NO			
24. 24-Hour Waiver: <input type="radio"/> YES <input checked="" type="radio"/> NO				25. Plea by Youth: <input type="radio"/> Guilty <input checked="" type="radio"/> Not Guilty			
26. Verdict: <input type="radio"/> Guilty <input checked="" type="radio"/> Not Guilty <input type="radio"/> Dismiss				27. Staff Representative:			
28. REASON FOR DISPOSITION: <input type="checkbox"/> Report is clear and precise <input type="checkbox"/> Only defense is denying contents of report <input type="checkbox"/> Lack of a credible defense/little or no defense <input type="checkbox"/> The Youth presented no evidence to refute the charges <input type="checkbox"/> Based on youth's statement <input type="checkbox"/> Employee's version/report is determined to be more credible <input type="checkbox"/> Pled Guilty/Accepted Guilty plea <input type="checkbox"/> Other							
29. MOTIONS (INCLUDE REASON IF DENIED):							

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8. Violation: ESCAPE						9. Violation Number: 5	
10. Was the violation a result of an IS video review? <input checked="" type="radio"/> YES <input type="radio"/> NO							
11. DESCRIPTION OF BEHAVIOR (include all relevant information - "usual youth behavior, staff witnesses, physical evidence & disposition, immediate action including the use of interventions"; use supplement if necessary) youth [REDACTED] Broke concrete center blocks in his cell D-1 and escaped around 7:47pm on 1-19-22 by climbing the EAST CORNER FENCE.							
12. Signature of reporting employee: [Signature]				13. Name, Title, Assignment (PRINT): Randy Booth JR / Shift Commander			
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