

State of New Mexico  
County of \_\_\_\_\_  
\_\_\_\_ Judicial District Court  
Children's Court Division

Cause No: \_\_\_\_\_

File #: \_\_\_\_\_

In the Matter of

\_\_\_\_\_  
a Child.

**Probation Agreement and Order**

You are hereby placed on probation for committing the Delinquent act (s) and/or probation violation (s):

Period of Probation:

- |                          |                                                     |                          |                               |
|--------------------------|-----------------------------------------------------|--------------------------|-------------------------------|
| <input type="checkbox"/> | 6 month Consent Decree                              | <input type="checkbox"/> | Probation up to 1 year        |
| <input type="checkbox"/> | 6 month Consent Decree with no opposition to extend | <input type="checkbox"/> | Probation up to 2 years       |
| <input type="checkbox"/> | Extended Consent Decree not to exceed one (1) year  | <input type="checkbox"/> | Probation up to the age of 21 |

Time Reduction: \_\_\_\_\_

Probation end date will be no later than: \_\_\_\_\_

I will participate in developing a plan of care that will help support my success on probation and I have the ability to earn early release.

I agree to the following conditions of probation:

- \_\_\_\_\_ 1. General Behavior: I will obey all laws.
- \_\_\_\_\_ 2. Reporting and Visits: I will/understand:
- a. Report in person to my Probation Officer/designee as required;
  - b. Keep all appointments arranged by my Probation Officer;
  - c. My Probation Officer/designee may visit me at any location, including my home, school, or work site.
- \_\_\_\_\_ 3. Residence:
- a. I will stay at \_\_\_\_\_
  - b. I will be under the physical custody of \_\_\_\_\_
  - c. I may not be placed under another person's custody without prior approval from my Probation Officer.
  - d. I must notify my Probation Officer within 24 hours of any changes of location or residence.
  - e. I must first get permission from my Probation Officer if I leave the County, the State or will be away from my location or residence for more than 24 hours.

- \_\_\_\_\_ 4. Alcohol – Drugs – Weapons: I will not:
- a. Use or possess any alcohol,
  - b. Use or possess any illegal drugs,
  - c. Use or possess any illegal synthetic substances,
  - d. Use or possess any harmful mind or mood altering substances,
  - e. Use or possess medications not legally prescribed for my use,
  - f. Use or possess any drug paraphernalia, or
  - g. Use or possess any weapons, or firearms.
- \_\_\_\_\_ 5. Search and Seizure: I will:
- a. Allow the probation department, with pre-approval from the Chief Juvenile Probation Officer, to conduct a warrantless search of my person and property upon reasonable suspicion to believe the search will produce evidence of a violation of probation.
  - b. Submit to drug and alcohol testing upon request by my JPO.
- \_\_\_\_\_ 6. Special conditions: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Parent/Guardian/Custodian:**

I will support and help in my child's successful completion of all probation requirements, including creating and following his/her plan of care.

\_\_\_\_\_ Initials

\_\_\_\_\_ Initials

My probation officer may use incentives, interventions, and graduated sanctions to promote my progress on probation.

I understand that any changes to the conditions of my probation will require approval.

I understand that if I do not follow these conditions of probation it can result in further action by the court.

Approved and Agreed to by:

CHILD	DATE	P/G/C	DATE
JPO	DATE	P/G/C	DATE
CHILD'S ATTORNEY	DATE	CHILDREN'S COURT ATTORNEY	DATE

It is ordered that the above agreed to conditions of probation be approved and adopted. Approved and Recommended by:

CHILDREN'S COURT JUDGE	DATE	SPECIAL MASTER	DATE
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