

## Youth Confirmation of Receipt Prison Rape Elimination Act (PREA)

This is to acknowledge that I received information as well as viewed a PowerPoint presentation on the Prison Rape Elimination Act of 2003 regarding the following:

- How to avoid risky situations related to sexual assault
- How to safely report rape or sexual activity
- ❖ How to obtain counseling services and/or medical assistance if victimized
- What the risks and potential consequences are for engaging in any type of sexual activity while in the facility

I further acknowledge that if I have any questions or need assistance I will seek guidance.

Youth Signature	Date
Youth JETS/Client ID No.	
Location	
C: Youth's Case Record	