



**STATE OF LOUISIANA
YOUTH SERVICES
Office of Juvenile Justice**

RECEIPT OF:

YS Policy No. B.5.1 “Youth Code of Conduct”

This is to acknowledge that I, _____
have received a copy of Youth Services Policy No. B.5.1 “Youth Code of Conduct”, which
outlines the youth disciplinary rules and the consequences for violating the rules.

I understand that I am responsible for familiarizing myself with its contents; and that I must
conduct myself in accordance with the Code of Conduct Rules.

I further acknowledge that if I have any questions or need assistance I will seek guidance
from my Case Manager.

Youth Signature

Date

Youth’s Name (printed and legible)

Date

Client ID #