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

November 2016