

Incident:__

Communities for Restorative Justice

Restorative Agreement

Openi	ng Circle date:	Closing Circle date:
The pe	erson involved in this inc	ident agrees to perform the activities listed below in order
1. 2. 3.	to use this understanding improve future decision	rstanding of the impact of acts, whether harmful or helpful ng to
seriou most that the who continued in dan result caused encou back to a The follow	s emergencies. It is exponential possible from the eundersigned will do all caused harm agrees to als agreed to with facilitating of not being compoin this case being refed harm agrees to refranters with police during the Circle and/or having person involved agrees the recommendations of elor; payment must occurred.	over all other activities other than school, work, and pected that the person will make every effort to get the ese activities, and not "just go through the motions," and I within their power to help him or her do this. The person meet with or contact a facilitator weekly or at other stor. S/he further agrees to seek help early if any item is letted on time. Failure to complete this agreement may erred back to the referring agency. The person who's in from activity harmful to his/herself or others. Further the period of time with C4RJ may result in being called go the case returned to the police. To obtain the services of an approved counselor and to the counselor. The person is responsible for paying the robefore the case is closed.
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All parties agree to make a good of	faith effort to complete the agreement above by t	he date
The Closing Circle will be held on	nat	
Signed:	Date:	
Keeper:		
Person(s) harmed:		
Person(s) harmed supporter(s):		
Facilitator(s):		
Person(s) responsible:		
Person(s) responsible supporter(s	s):	
Police representative:		
Case coordinator(s):		
Community Member(s):		