

SART - TRUANCY DIVERSION AGREEMENT

Student's Name:	SART Hearing Date:	SART expiration Date:	School & Grade:
Student's email Address:	Student's Phone Number:		Student DOB:
Parents/Guardians Name:	Parent email Address:		Parent Phone Number:

It has been determined that the student meets criteria for a SART (Student Attendance Review Team) intervention/diversion based upon the following criteria.

1. The student is a continuing truant as defined by Minnesota Statute 260A.02, Sub. 3.
2. The student is a resident of Blue Earth County.
3. The student has not previously been subject to a SART intervention during that current school year.
4. The student has not previously been the subject of a truancy petition.

Participation in the diversion is voluntary and in lieu of attending Court. The initial term of the agreement will be up to 90 days, which may be extendable an additional 45 days.

I will be under the supervision of the Blue Earth County Community Corrections Department (probation). I understand and agree to abide by the following rules:

1. I will attend school regularly with no unexcused absences. I must obtain prior approval from my probation officer for all other absences.
2. I will attend all meetings schedule by the SART.
3. I will work to my potential in each class, completing all homework assignments.
4. I will be respectful to teachers, school staff, and fellow students. I also agree to use appropriate language in school and will not fight or bully staff or students.
5. I will abstain from the use of alcohol and other mood-altering chemicals unless prescribed by a doctor and submit to random unwarranted urinalysis or breath testing by probation or law enforcement.
6. I along with my parents, agree to sign all releases of information requested by the SART.
7. I agree to cooperate with any assessments and follow all recommendations as deemed appropriate by probation and any other entities involved in my case.
8. I agree to keep my probation officer informed of any personal changes; including change of address, phone number, work status, etc.
9. I will immediately notify my probation officer if I have any contact with law enforcement.
10. I agree to obey all local, state, and federal laws.
11. I agree to follow all parental rules, including curfew set by my parents and or probation officer.
12. I will attend credit recovery i.e. night school and summer school as deemed appropriate by the SART.
13. Other _____

THE PARENT/GUARDIAN SHALL:

1. Get child to school every day and on time.
2. Not remove child from school early without providing the school a valid excuse.
3. For all illness absences:
 - a. Provide school with written verification by doctor/medical advisor; OR
 - b. Send child to school to be checked/released if ill.
4. For all absences: contact school to explain absence.
5. Support the student and recognize improvements and growth.
6. Attend all regularly scheduled parent/teacher conferences.
7. Attend all meetings scheduled by the school, Count Attorney's Office, and court.

TERMINATION

A student may be terminated from the SART program and a truancy petition filed with the Court at any point during the supervision period when the student has:

1. Failed to improve attendance at school by continuing to have unexcused absences and the total number of unexcused absences for the school year is at least 10 days with one or more period unexcused; and/or
2. Otherwise violated the conditions listed in the SART Program Agreement.

COMPLETION

To be successfully discharged from the supervision of the SART a student should demonstrate successful adjustment and substantially comply with all conditions of the SART agreement. The student should also show stability in terms of home adjustment, school attendance, employment and social relationships.

Participant Signature: _____

Date: _____

Parent's Signature: _____

Date: _____

SART member Signature: _____

Date: _____

SART member Signature: _____

Date: _____

SART member Signature: _____

Date: _____