



IMPACT OF CRIME: ADDRESSING THE HARM TO VICTIMS AND THE COMMUNITY ATTENDANCE SHEET

Program Name: _____

Session Date: _____ Time: _____ AM PM Session Length _____ Minutes

Facilitator 1 Name & Title: _____

Facilitator 2 Name & Title: _____

Guest Name & Title: _____ Check one: Speaker Observer

Chapter and Objectives Completed Today: _____ (Check box below)

Chapter	Objectives➔	1	2	3	4	5
1	Victim Impact and Restorative Justice	<input type="checkbox"/>	<input type="checkbox"/>			
2	Personal Accountability (<i>Challenging Stinkin' Thinkin'</i>)	<input type="checkbox"/>	<input type="checkbox"/>			
3	Introduction to Harm (<i>Looking at Property Crimes</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Consequences of Making Decisions (<i>Choices Under the Influence</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Ripple Effect of Crime: The Impact of Poor Decision-Making (<i>Looking Closer at Violent Crimes</i>)	<input type="checkbox"/>	<input type="checkbox"/>			
6	Managing Conflict (<i>A Focus on Hate Crimes and the Community</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	The Road to Reparation (<i>Building Communities and Repairing the Harm</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Line	Youth Name (Print)	JJIS ID	Youth Signature
1.			
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15.			

Have any youth dropped out of this group? (If "Yes," list below.) Yes No N/A

Youth Name (Print)	JJIS ID	Date Dropped	Reason Dropped