

SAM Program Participation Requirements

Date
Name
Address
City, State, Zipcode

Re: Stop Alcohol to Minors Program Participation Requirements
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Dear Minor,

This letter includes the requirements expected of a Stop Alcohol to Minor (SAM) Program employee. In addition to all employment requirements, a SAM Minor is expected to comply with Chicago Police Department directives and cooperate with testimony in SAM are asked to review the Stop Alcohol to Minors Program guidelines, the Chicago Police Department Order on listed requirements with your parent or guardian. After reviewing the documents, please initial this page and sign in the affidavit section. Your parent or guardian must also initial this page and sign where directed. Please bring this signed letter to your interview.

SAM Program Minors must comply with the following requirements to be employed in the program:

- ▶ Minors must meet all employment requirements.
- ▶ As a requirement of employment, minors must agree to testify at all subsequent legal Stop Alcohol to Minors Program. Testimony can be required even after the minor reaches 20 years of age or is no longer active for SAM Program testing. Minors can be called to testify up to one year after ending their participation in SAM Program testing.

Minor's Initials _____
Parent/Guardian's Initials _____

Date

Name

Address

City, State Zipcode

Re: Affidavit For Stop Alcohol to Minors Program Participation Requirements

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- ▶ An accurate school and/or availability schedule must be provided monthly by the minor to the SAM Program supervisor. The Unit Commanding Officer of the License Investigations Unit will ensure its submission to the Chief of the Municipal Prosecutions Divisions, Department of Law. Any changes in availability must be reported to the SAM Program Supervisor immediately to avoid court conflicts.

- ▶ To expedite case scheduling, the minor will provide his/her name, address, and current telephone number to the Unit Commanding Officer of the License Investigations Unit who will forward it to the Chief of the Municipal Prosecutions Division, Department of Law. The minor is responsible for immediate notification to the SAM Program supervisor anytime there is a change in phone number or address.

Affidavit

I, _____, acknowledge that I have reviewed the above criteria, the SAM Program Guidelines and the Chicago Police Department Order on "Investigations Directed at First Amendment Activity." After reviewing this material, I attest that I will comply with all requirements of a SAM Program Minor.

Signature _____ Date _____

I, _____, am the parent/guardian of the minor, _____
I have reviewed "Investigations Directed at First Amendment Activity" and the Stop Alcohol To Minors Program Guidelines. Having knowledge of the expectations for my child/ward, I consent to the scheduled interview and possible employment of my child/ward in the SAM Program.

Signature _____ Date _____