



**ASSEMBLY STANDING COMMITTEE ON CHILDREN AND FAMILIES
ASSEMBLY STANDING COMMITTEE ON EDUCATION**

**SENATE STANDING COMMITTEE ON CHILDREN AND FAMILIES
SENATE STANDING COMMITTEE ON EDUCATION**

NOTICE OF PUBLIC HEARING

SUBJECT: Educational opportunities for youth in juvenile justice facilities.

PURPOSE: To examine the educational programming provided to youth in placement and their transition to school districts once placement ends.

**Wednesday, June 17, 2009
Hamilton Hearing Room B, Legislative Office Building
2nd Floor
Albany, New York
10:00am**

Youth adjudicated as juvenile delinquents may be placed with the Office of Children and Family Services (OCFS) by court order for a specified period of time. For the duration of the placement, OCFS is responsible for providing educational services in accordance with the regulations of the State Education Department (SED). When placement ends, many youth return to the community and seek enrollment in a school district. This hearing will examine the educational programming being provided to youth while in placement and their transition to school districts once the placement ends.

Persons wishing to present pertinent testimony to the Committees at the above hearing should complete and return the enclosed reply form as soon as possible. It is important that the reply form be fully completed and returned so that persons may be notified in the event of emergency postponement or cancellation.

Oral testimony will be limited to 10 minutes. In preparing the order of witnesses, the Committees will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible. In the absence of a request, witnesses will be scheduled in the order in which reply forms are postmarked.

Ten (10) copies of any prepared testimony should be submitted at the hearing registration desk.

In order to further publicize these hearings, please inform interested parties and organizations of the Committees' interest in hearing testimony from all sources.

In order to meet the needs of those who may have a disability, the New York State Senate and Assembly have made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Senate and Assembly facilities and activities.

**William Scarborough
Member of Assembly
Chair
Committee on Children and Families**

**Velmanette Montgomery
Member of Senate
Chair
Committee on Children and Families**

**Catherine Nolan
Member of Assembly
Chair
Committee on Education**

**Suzi Oppenheimer
Member of Senate
Chair
Committee on Education**

PUBLIC HEARING REPLY FORM

Persons wishing to present testimony at the public hearing on educational opportunities for youth in juvenile justice facilities are requested to complete this reply form as soon as possible and mail it to:

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Albany, New York 12248
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Elisha Wellington-Cleary
Committee Clerk
Senate Committee on Children and Families
Room 711, Legislative Office Building
Albany, NY 12247
Email: wellingt@senate.state.ny.us
Phone: (518)-455-3458
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- I plan to attend the following public hearing on educational opportunities for youth in juvenile justice facilities to be conducted by the Senate Committee on Children and Families, Assembly Committee on Children and Families, Senate Committee on Education and the Assembly Committee on Education on June 17, 2009.
- I plan to make a public statement at the hearing on educational opportunities for youth in juvenile justice facilities on June 17, 2009. My statement will be limited to 10 minutes, and I will answer any questions which may arise. I will provide 10 copies of my prepared statement.
- I will address my remarks to the following subjects:

- I do not plan to attend the above hearing.
- I would like to be added to the Committee mailing list for notices and reports.
- I would like to be removed from the Committee mailing list.
- I will require assistance and/or handicapped accessibility information. **Please specify the type of assistance required:** _____

NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

E-MAIL: _____

TELEPHONE: _____

FAX TELEPHONE: _____