Lancaster County Youth Intervention Center

P.U.L.S.E. Program

235 Circle Avenue Lancaster, PA 17602 717-299-7821

Graduation Ceremony Information

Congratulations are in order since	
P.U.L.S.E. Program. We are inviting up to (but not exceeding	
participant to attend a graduation ceremony on	, 20, to be held at the Lancaster County
Youth Intervention Center at 1:30PM. Since the ceremony is	
building need to follow the standard safety measures taken for all building visitors (listed below). Due to the steps needed to be taken to process visitors, please arrive at 1:00PM (no one will be permitted to enter the building after 1:15PM). Children are permitted to attend the graduation ceremony.	
Graduation Ceremony Attendance Guidelines:	
No mobile phones or cameras will be permitted (P.U.L.S.E. staff will take a family photo following the ceremony).	
All visitors must be dressed appropriately for the visitation environment.	
• All coats, hats, purses, and personal property must be stored in a locker in the Main Lobby Area. We suggest you leave all other personal items at home or in your vehicle. After all items have been secured, all visitors (including children) will be screened through the metal detectors for any further contraband. Once a visitor has been cleared of contraband, they will wait in the lobby area until escorted by a staff member to the visitation area.	
• Once a visitor has signed in, and has been screened for contraband, they may r	not depart the facility before visitation begins.
 Visitors under the influence of drugs or alcohol will not be permitted to visit and will be directed to depart the facility immediately. 	
 Only family members listed below will be permitted to attend the graduatio advance if the list needs to be changed. 	on ceremony. The P.U.L.S.E. Program Coordinator must be notified in
As the parent/guardian, I acknowledge that I have reviewed the to communicate these guidelines to others who will be attended the above for your reference and return the lower portion with	ing. I have listed those individuals below. Please keep
Name of Parent or Guardian	Signature of Parent or Guardian
Name of Attendee:	Relationship to Participant: