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# Vilas County Jail Electronic Monitoring Program (EMP) Enrollment Application

# Applications Instructions:

- 1. Type or Print the information requested in all areas. The application must be neat.
- 2. Return this application with:
  - A \$40.00 non-refundable cash or money order for the "Processing Fee"
  - The "Employment Verification Form" must be filled our and signed by the employer.
  - Your last pay stub
  - Proof of auto insurance and the name and phone number of the person with a valid drivers license providing transportation.
- 3. You must submit to a drug test and the results must be negative.
- 4. Do not write in the shaded areas.

20		u u. cac.								
Applicant Information Applicant name (Last, Firs										
Address:		Apt Numbe	pt Number:							
City:					State:			Zip:		
Home phone:			Work Phone:	Work Phone:				Cellular phone:		
Weight:	Height:		Hair color:	ı	Eye colo	r:	Drivers lice	Drivers license # & state issued:		
Race:	ace: Sex:			,	State of birth:		Soc. Sec #:			
Commitment Informa	tion:									
	tion.	Offense			Court			ludge		
Length of sentence: Offense:					Court:			Judge:		
Length of sentence:		Offense	:		Court:			Judge:		
Residence Information	n:									
Have you been charg	ed with batte	erv or do	omestic violence	?		If so doe	es the victim	n live with you?	,	
Yes □ No □ If yes	list name of	victim:				Yes □				
100   140   11 yea			r persons living a	at tha r	ooidor					
Non		an ourie				ice where y				
Nar	ne		Sex	<i></i>	\ge	1	N.	elationship		
Vilas (	County Jail V	erificatio	on of commitmen	nt and	reside	nce: (To be	completed	by jail staff only)		
Person Contacted:	Journey Cam 1		Contacted By:				Date and			
· orden contacted.			John Marie Land				2 3.10 3.11			
Emergency Contact I	nformation:									
Name (Last, First, MI)					Relation	onship:				
Address:		Sta	ite:	Zip:	Phone	y:				

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Court Ordered Meeting Sch					ment, etc.):					E
Type of meeting:	Day of the week	:	Meeting addre	ess:		<u>l</u>	Beginni	ing Time	9:	End Time:
	e written verific ounty Jail Verifi									
Person contacted:	Julity Sall Verill		acted by:	g sonedu	e. (10 be co			nd Time:		
Applicant Employment Information Employer:	rmation:									
Employment Address:					City:				State:	
Employment Phone Number:		Job Title:								
Supervisor's Name:		Length Employed:			Rate of I	Pay per Hour:				
When are you paid:			How: (Cash	, check, c	direct d	eposit)				
Job site location if other than emp	loyment address li	isted ab	oove:							
Is your employer related to	you? Yes □	No	□ If y	es how?						
	loyment:	(To be com								
Person contacted:		Conta	ected by:			L	Date ar	nd Time:		
Transportation Information:										
How do you commute to work?				How far is	your commute	from ho	me to v	vork?		
How long does it take one way?	Do you have a valid drivers licen Yes □ No □			se? Verified by and date:						
If you do not have a license, who will be driving you?					Driver's License Number			nber and	I state issued:	
Vehicle License #:	State: Mal	lake: Mod			ol:		Year	:		Color:
Auto Insurance Company Name: (	Provide copy of p	roof of i	nsurance with	n application	n)	Agents r	name:			<u> </u>
Policy number:	Agents Phone number: Agents Fax number:				iber:					

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Medical Inf Name of Doc					Phone n	number:			
List any illegal drugs taken recently									
What preso	cribed medicat	ion are you c	currently taking	ı?					
Have you ever attempted suicide? Yes □ No □ When?									
Do you hav	ve mental heal	th problems?	)	1					
How often	do you drink a	lcohol?							
Do you hav	Do you have a history of seizures?								
Are you pro	egnant? Yes	□ No □	If yes what is	s your due date?					
(To be completed by jail staff only)									
Arrest Hist	Orv.								
	•	cted or revok	ed from a hom	ne detention or work rel	lease prog	gram? Yes i	□ No □		
Have you	ever been cha	rged or convi	cted of escape	e? Yes □ No □		<del>-</del>			
Have you	ever been on E	MP before?	Yes □ No □	If yes where?					
Person conta		ail contact w	ith other EMP	or work release progra	ms: (To b	e completed Date and Tim			
Person conta	ciea.		Contacted	oy.		Date and Till	le.		
	r Cases Pendi								
Arrest Date:	Arresting	g Agency:	(	Charge:			Court:		
Are there any active restraining orders or no contact orders against you? Yes □ No □									
If yes, with whom?									
Probation or Parole:									
Are you on probation or parole? Yes \( \precedef \) No \( \precedef \) If yes, what county?  Enter current and past probation and / or parole information below:									
Start date: End date: Probation Agent:				Phone:		Charges:			
Have you ever had your probation or parole revoked? Yes □ No □ If yes where?									
Vilas County Jail criminal history v Person contacted: Contacted					To be com	npleted by ja  Date and Tim			
			23			2.1.2 3.1.3 7111			

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Acknov	wledgements:	
intentic Progra of the I result i	onally misleading or false information is reason for m. Furthermore, by signing this application I acknowle Electronic Monitoring Program and will abide by a sai	ied on this application is accurate. I also understand that any automatic denial in participation in the Electronic Monitoring edge that I have read and agree to all the terms and conditions d terms and conditions and understand that any violations can itoring Program as well as revocation of my Huber privileges
Participa	ints signature	Date/Time
Witness	signature	Date/Time
Electro Costs:	or money order only, made out to the "Vilas County Sin advance if your sentence is over 30 days. If your sentence is over 30 days.	daily fee of \$20.00 which the participant agrees to pay by cash Sheriff's Department". At least two weeks of fees must be paid sentence is under 30 days the fees must be paid in full prior to
•	<ul><li>Placement in EMP.</li><li>Paychecks: The Sheriff or his designee in accordanthe participant. Therefore, any paychecks must be tu</li></ul>	ce with State Statutes 303.08 will control all monies earned by irned over to the Sheriff's Department.
•	<u>Processing fee</u> : A one time non-refundable fee of \$ in.	25.00 must be submitted at the time this application is turned
•		n the processing fee. If at any time you test positive for illegal ent test you request. (You will not be allowed to participate in s.
•	<u>Medical Care</u> : The Vilas County Jail is <u>not</u> responsil participating in the EMP.	ble for you medical care or any medications while you are

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# **Electronic Monitoring Terms and Conditions:**

In accordance with Wisconsin State Statute 302.425, the Sheriff has the authority to place inmates on Electronic Home Detention in lieu of traditional incarceration if the inmate's needs or the needs of the inmate's dependants can not be met under normal confinement within the jail.

- 1. An applicant must be sentenced for a criminal traffic offense or a non-violent misdemeanor by the Vilas County Circuit Court. Any individuals who have committed sex offenses as defined under State Statutes 940 are disqualified for EMP.
- 2. The applicant's jail classification must allow for the EMP.
- 3. An applicant must be free of existing warrants and holds. Serving a sentence on EMP after being revoked from Probation or Parole is prohibited.
- 4. Applicants must provide adequate documentation to the EMP staff supporting that being incarcerated in the jail would prohibit a specific need for being met.
- 5. Inmates must have an established residence in Vilas County 90 days prior to the date of conviction.
- 6. Applicants must be employed a minimum of 32 hours per week, or be a full-time alternative school student, or prove a need for child care at least 8 hours per day, or be subsisting off retirement or disability income.
- 7. All applicants must earn at least minimum wage and provide proof of worker's compensation insurance.
- 8. Any inmate who requests to work for a "relative" must show proof of employment prior to starting their sentence on EMP. Such proof will include pay and tax records. This requirement also applies to self-employed inmates applying for the EMP.
- 9. Applicants must have an EMP staff approved residence.
- 10. Applicants must agree to abide by all Vilas Count Jail, Huber, and EMP rules. Any extensive history of Vilas County Jail rule violations may determine an applicant to be disqualified for EMP and their Huber privileges will be revoked.
- 11. Applicants must complete any recommended assessments and follow through with any recommendations of the assessments if so recommended.
- 12. Applicants must sign all necessary release of information forms to allow the Vilas County Jail Staff, District Attorneys Office Staff, Court System, Probation/Parole, Corporate Counsel, Justice Systems and any other treatment provider the ability to exchange program or treatment information.
- 13. Applicants must agree to pay all EMP fees as directed by the EMP Staff.
- 14. Applicants must have the approval of the Jail Administrator and Probation/Parole Agent if on any type of supervision with the Wisconsin Department of Corrections.
- 15. Applicants may be approved to meet the special needs of the Vilas County Jail.
- 16. Participation in the EMP is strictly a privilege and will be revoked any time a violation warrants such action. Electronic Monitoring Application form must be filled out entirely and approved by EMP Staff.
- 17. Any changes to address, telephone number, or employer must be communicated to the jail staff prior to admission to the EMP.

#### Placement Site Requirements:

The following placement site requirements will apply to all persons placed on EMP in order to ensure public safety and order.

- 1. Participants may not have firearms in the home while the Inmate is under the supervision of the EMP.
- 2. Participants may not have alcoholic beverages stored at the home or possess such items while the inmate is under the supervision of the EMP.
- 3. Participants cannot possess any item or substance that is illegal.
- 4. Participants must have access to electrical power to charge the monitor batteries. The participant must replace the batteries on the monitor at least every twelve hours (12) with a freshly charged battery. Failure to do so will result in revocation of EMP placement.
- 5. Participants cannot possess or use any drugs legal or illegal, which have not been prescribed by a physician. This prohibition includes all over the counter items available without a prescription that contain alcohol. Absolute sobriety must be maintained while participating in the EMP.
- 6. All information must be provided regarding any individuals who reside with the participant.
- 7. No unauthorized visitors will be allowed while participating in the EMP.
- 8. Participants must agree to the random search of their person, home, and vehicle while participating in the EMP.

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## **Inmate Conduct:**

The following rules will be followed by all participants placed on EMP in order to maintain an orderly environment with clear expectations of behavior and systems of accountability.

- 1. Participants must comply with all staff requests and/or directives.
- 2. Upon request, the participant must supply a blood, breath, or urine sample for the purpose of determining substance abuse.
- 3. All Vilas County Jail/Huber Rules and Regulation apply to a participant while participating in the EMP.
- 4. Participants cannot alter, destroy, or otherwise interfere with the electronic bracelet, support unit, or any peripheral equipment used in the EMP. The participant will pay for any damages or losses due to negligence.
- 5. The monitor cannot be submersed in water. (no bathing or swimming) However, showering will not hurt the unit.
- 6. No participant can threaten, verbally or physically, any member of the public, correctional staff, or law enforcement official.
- 7. The participant in the EMP shall show respect to all correctional staff and law enforcement officials.
- 8. No participant will communicate false information to any correctional or law enforcement official.
- 9. Participants must obey all municipal, county, state, and federal criminal laws, traffic laws and ordinances. All contacts with law enforcement personnel shall be reported to the Vilas County Jail Staff as soon as practical.
- 10. If wages, salary, unemployment compensation, or employment training benefits are earned, the participant will be required to pay board, along with other court ordered payments. Any remainder may be disbursed for the support of the participant's family. Participants may not assume new debts without the permission of the EMP staff or Jail Administrator.
- 11. Participants are required to take the most direct route to and from their permitted destination with no unauthorized stops. Participants are required to arrive and return to their destination in the allotted travel time.
- 12. Participants must request, in writing, any changes in their work schedule. Changes cannot occur until approved by the EMP staff.
- 13. No participant is permitted to work more that 6 days per week, may not work Sundays or be away from the detention site more that 12 hours per day.
- 14. When out on pass, the inmate must return to the detention site by the time indicated on the pass. No participant can forge or alter any pass or Vilas County Jail document.
- 15. Participants who quit, or are terminated from their job, must notify the Correctional Staff as soon as possible following the job action.
- 16. It is the participant responsibility to ensure that all passes are filled out completely.
- 17. When overtime is required, the inmate must obtain permission from Correctional Staff prior to their normal quitting time. The participant must also provide, on company letterhead, written notification signed by a supervisor indicating when work was completed. If overtime is scheduled for a future date, a letter from the employer on company letterhead must be submitted in advance.
- 18. Participants will be given travel time to get to and from work not to exceed one hour. If more than one hour is needed, the request may be granted for exigent circumstances only. All requests should be made to the EMP staff and are at the discretion of the EMP staff.

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## Discipline and Sanction:

In order to treat participants in a fair and consistent manner a system of due process will be established to provide a means to hold participants accountable for their behavior.

- 1. Rule violations can be handled as major rule violations or minor rule violations.
- 2. Types of disciplinary sanctions may vary based upon the severity of the offense or offenses and the frequency which a participant violates rules. Sanctions, which may be imposed as minor discipline, include the following.
  - a. Verbal reprimand
  - b. Written reprimand
  - c. Loss of one privilege for a 24 hour period
  - d. Confinement in the jail for up to 24 hours
- 3. Major discipline has more flexibility with regard to possible sanctions. Sanctions, which may be imposed as major discipline, include the following.
  - a. Loss of one or more privileges for up to 10 days
  - b. Loss of up to two days of good time if applicable for any one offense involving one or a number of rule violations.
  - c. Automatic revocation of EMP placement and Huber privileges.
- 4. In the event that an participant is observed or suspected to be in violation of a rule or number of rules, the Vilas County Jail Staff Member making the observation, or having the suspicion, will determine whether to address the matter as a major or minor rule violation.
- 5. An alleged major rule violation report will result in a disciplinary hearing no sooner than 24 hours from the time that the participant was served with the disciplinary report.
- 6. The exact date and time of the hearing will be determined by the availability to form a disciplinary hearing panel for a major rule violation.
- 7. Based on the legitimacy of the request, during disciplinary proceedings, and accused participant may be allowed to call witnesses, confront their accuser, and/or be represented by a staff advocate if appropriate.
- 8. A sanction or penalty may or may not be imposed by the hearing panel. Disciplinary findings and imposed sanctions may be appealed to an appeal examiner in accordance to the chain of command.
- 9. A participant must indicate their desire to appeal immediately following the findings decision. The appeal is to be made in writing and turned over to a staff member within 24 hours of the findings decision.
- 10. For major rule violations, sanctions will not be imposed until after the appeal process is completed.
- 11. For minor rule violations, sanctions will be imposed immediately, or soon thereafter. The participant will be issued a copy of the disciplinary report.
- 12. The participant may still appeal informal disciplinary actions, but the appeal process will not delay that imposition of a sanction. The purpose of the informal appeals is to give participants a vehicle to have inappropriate actions removed from their disciplinary records.
- 13. Participants may have their status on EMP administratively suspended for up to 5 days at a time. Administrative suspension may occur for the purpose of investigating a major rule violation or a series of violations that may result in the formal disciplinary process. The participant will be housed in the Vilas County Jail during any Administrative suspension time.
- 14. Work release privileges may be afforded in accordance with existing jail rules and policies.
- 15. Based on the legitimacy of the appeal the original penalty may be eliminated, withheld, increased or decreased by the appeal examiner. The appeal decision is final.

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## Communication:

A system of communication will be established in order to provide a means for a participant to communicate with EMP staff during their participation in the EMP.

- 1. All communication should be written and delivered to the jail, or mailed via the U.S. Postal Service. The request will be directed to the appropriate individual.
- 2. Telephone inquiries will be handled for exigent circumstances only. A response to the request will be provided as soon as feasible, depending on the availability of the staff member.
- 3. During participation on EMP, the participant may feel that they have a basis for a complaint. When this is the case, the participant is encouraged to resolve the complaint informally with the staff member involved.
- 4. When informal resolution is not possible, written complaints and decision appeals are to be submitted in accordance with chain of command.
- 5. Written complaints not filed in accordance with the proper chain of command will be dismissed.
- 6. The applicable staff member will review all complaints properly submitted and forwarded.
- 7. The legitimacy of each complaint will be determined and a response and/or resolution will be provided. Keep in mind that the complaint procedure is a vehicle to seek resolution to a legitimate factual concern. Communicating false information is prohibited.
- 8. All requests for non-emergency medical treatment must be in written form.
- 9. The participant is responsible to notify the correctional staff as soon as feasible about all emergency medical care that takes place while participating on the EMP.
- 10. Both emergency and non-emergency medical requests must be accompanied with appropriate documentation as soon as possible.
- 11. Any changes to the inmates schedule for work or program needs must be pre-approved by the jail staff. The changes must be submitted in writing and provide: dates and times of the change, name of the organization, address, phone number and the name of the contact person.