OKLAHOMA PRISON RAPE ELIMINATION ACT ZERO TOLERANCE ACKNOWLEDGEMENTS FOR INMATES (115.33)

You have the right to be free from sexual abuse, sexual harassment and retaliation for reporting such.

All allegations of sexual abuse or harassment from inmates or staff of yourself or another inmate can be reported utilizing one of the following options:

- You may report verbally to any staff member to include the facility head/administrator of Institutions/Community Corrections, security staff, medical staff, mental health staff and unit staff.
- You may submit a written report to either the facility head/unit head's office at this facility or to the Office of Inspector General at 3400 Martin Luther King Avenue, Oklahoma City, Oklahoma 73111.
- You may have a family member/friend, clergy, or any other person outside the facility report the abuse to the facility head/administrator of Institutions/Community Corrections office of this facility or they may contact the office of Inspector General.
- You can use the inmate phone bank, dial 073, and make your report after you hear the recording. This is not a
 24 hour seven day per week hotline. If you are in danger or need immediate assistance, do not rely on this
 method; report to a staff member. These calls are anonymous unless you identify yourself. These calls are not
 recorded by the facility.
- You may send written allegations to the Oklahoma State Bureau of Investigations at 6600 N Harvey, Oklahoma City, Oklahoma 73116.

OP-030601 states, "Reporting sexual abuse and protection from retaliation for reporting, including methods to identify and report such misconduct. This will include information that the inmate victim has the option to report the incident to a designated staff member or any other immediate staff. Other reporting methods include: facility/unit head, third party contacts, Securus hotline, sick call, request to staff, office of Inspector General or the Oklahoma State Bureau of Investigations (OSBI);"

You have the right to treatment and counseling at no charge to you if you are a victim of sexual abuse or harassment.

All allegations are investigated. There are sanctions for making false allegations.

I understand that staff of the opposite gender will be in the housing area of the facility and that I am responsible for being dressed at all times when not showering, changing clothes or using the restroom.

The willful and/or intentional display of the genital area, groin, buttocks or female breasts is strictly prohibited. Inmates engaging in such behavior will be held accountable and may receive a disciplinary action through the misconduct process.

I have viewed the PREA video and been provided the opportunity to ask questions.	
I have received information in person and been provided the opportunity to ask questions.	
In signing this document, I acknowledge that I understand the information stated above.	
Name: (Print)	(Sign)
ODOC Number:	Date:
Staff Member Signature	Title:

Field File: Section 3 (R 12/21)