

OKLAHOMA DEPARTMENT OF CORRECTIONS WORK RELEASE/HALFWAY HOUSE RULES AND CONDITIONS

I understand that work release/halfway house is a privilege. By my signature, I understand and agree to the following rules and conditions and, as indicated below, my identification documents have been returned to me. I understand that I remain in the custody of the Oklahoma Department of Corrections and I can be removed from the work release/halfway house program as a routine classification action by facility staff due to, but not limited to, misconduct or program failure.

1. I will only utilize transportation that has been approved by my facility head. I also understand that approved visitors, employers, employees or volunteers, once approved, may transport me to my approved job site.
2. I will not stop any place en route to job search/work or on return unless approved in advance and with an approved itinerary.
3. Upon being offered employment, I will advise the employer that I am incarcerated and obtain a written signature verifying notification. I will provide written verification of such notice to my case manager the same day.
4. I will not receive personal visitors at my job or make or receive personal phone calls.
5. I understand that if I fail to comply with directives pertaining to my health care from the medical unit, I may be removed from the work release / halfway house program.
6. If I fail to go to work, I will notify security staff/control office, my case manager and my employer.
7. I will not lay in from work to speak to my case manager or other staff unless they have arranged for my lay-in.
8. I will not leave my job site for any reason, including lunch with my supervisor, unless approved by my case manager in advance.
9. I will not receive cash payments, advances or use payroll deductions. Child support or job related expenses such as uniforms, work boots, etc., may be deducted, but must be listed. Food/drinks/merchandise are not authorized deductions.
11. I will not directly supervise other inmates for any reason.
12. I agree to pay all applicable program support fees.
13. I will not work for an amount less than minimum wage.
14. I will not work for commission; contract labor or end of contract payment (i.e., completion of job).
15. While assigned to work release/halfway house and employed, I will be assessed a co-pay of \$25 per emergency room visit if the emergency room visit does not result in hospital admission.
16. I am not allowed to drive a motor vehicle on any public roadway.
17. Identification Documents (Initial all provided to inmate): _____driver's license _____birth certificate
_____state identification card _____social security card _____notarized copy of CRC
_____Other:_____
18. I will not enter into a relationship or make unwanted advances or gestures to a co-worker.
19. I will not make unwanted verbal compliments, harass, ask favors, or request co-workers bring any items to the work location.
20. I will not discriminate against co-workers based on gender, race, religion, etc.

Inmate Signature

ODOC#

Date

Witness