



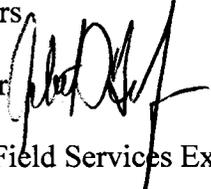
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Agency of Human Services

INTERIM REVISION MEMORANDUM

TO: All Staff and Interested Stakeholders

FROM: Robert D. Hofmann, Commissioner 

RECOMMENDED BY: Jacqueline Kotkin, Field Services Executive

DATE: March 17, 2008

RE: Interim changes to Administrative Directive, *Conditional Re-Entry (12/30/02), Appendix A, Terms of Release ("Furlough Agreement")*

We are revising the commonly used "furlough agreement" form based on input we have received from staff. These changes pertain to the *Terms of Release Form*, which is *Appendix A in #371.15, Conditional Re-Entry (12/30/02)* on the Web and *Release Supervision Agreement (12/16/05)* in the Statewide Forms folder in the Forms directory.

The name has been changed on the Web to *Furlough Agreement*. **These interim changes are effective immediately.**

CHANGES

Please see the attached newly revised *Furlough Agreement*, which outlines all of the changes to each condition.

REASONS FOR CHANGES

This form is being revised for the following reasons:

Added:

- *Condition Q*, "I will fulfill all financial obligations required of me including, but not limited to, rent, program fees, restitution, fines, and supervision fees as required" was added because it gives the Probation Officer the authority to hold an offender accountable for not paying rent. However, it does not take away the landlord's legal requirement to go through a formal eviction process; i.e., a violation of *Condition Q* would not result in a violation for loss of residence. Housing providers have advised us that adding this leverage may increase their willingness to rent to offenders.

Added:

- *Condition S*, “I will sign any releases or other documents necessary so that my assigned Probation Officer or designee can discuss my progress in all of my Department of Corrections’ required programs, including, but not limited to, drug/alcohol treatment and mental health counseling” was added so Probation Officers could confirm an offender’s progress in treatment.

Added:

- *Condition U*, “I will sign a new or modified *Furlough Agreement* as directed by my assigned Probation Officer or designee” was added so a PO could require an offender to sign a new *Furlough Agreement* as their circumstances change.

NOTE: In the past, some Probation and Parole offices have created a new or modified the Department’s current *Furlough Agreement* (including *Special Conditions for Sex Offenders and Domestic Violence Offenders*). The attached is the **only *Furlough Agreement*** that staff will use. **The revised *Furlough Agreement* (including the attached *Special Conditions for Sex Offenders and Domestic Violence Offenders*) shall not be locally amended or altered in any way.** That said, we review directives periodically and welcome future suggested changes.

The Policy Development Unit has initiated a review of the entire directive, which will be posted for staff feedback in the near future. We will be creating a Quality Assurance process after the complete revision of #371.15, *Conditional Re-Entry*, to ensure consistency across the state.

MANUAL MAINTENANCE

Please remove any current hard copy of the *Furlough Agreement*, whether as an attachment to *Conditional Re-Entry*, in a policy manual, or elsewhere and replace with this revised *Furlough Agreement* (effective March 17, 2008). In the Forms Directory, this has a drop down menu for filling out.

**Vermont Department of Corrections
FURLOUGH AGREEMENT**

Select Agreement Type

Offender Name: DOB
Management Program Level (MPL): Select Management Program Level
Offenses:
Address:
Home Phone:
Work Phone:

Standard Conditions

The following are applicable to all offenders:

- A. I will not be cited, nor charged with any act punishable by law, including city and municipal codes.
- B. I will immediately report (within 24 hours) any contact I have with law enforcement to my assigned Probation Officer or designee.
- C. I will not engage in threatening, violent or assaultive behavior.
- D. I will report to my assigned Probation Officer or designee as directed.
- E. I will allow my assigned Probation Officer or designee to visit me in my home or place of employment or elsewhere at any time.
- F. I will not purchase or consume alcoholic beverages.
- G. I will not purchase, possess, or consume regulated drugs without a prescription from a licensed physician.
- H. I will submit to a drug screen or alcohol test as directed by my assigned Probation Officer or designee.
- I. I will reside as directed by my assigned Probation Officer or designee.
- J. I will work as directed by my assigned Probation Officer or designee.
- K. I will participate as directed in community service work, work crew, or structured work search as directed by my assigned Probation Officer or designee.
- L. I will submit my person, place of residence, vehicle, or property to a search at any time of the day or night by my assigned Probation Officer or designee
- M. I will not possess weapons or firearms.
- N. I will not drive a motor vehicle of any type unless approved by my assigned Probation Officer or designee.
- O. I will not leave the State of Vermont without written permission of my assigned Probation Officer or designee.
- P. I will abide by all facility rules should I be incarcerated on a graduated sanction.
- Q. I will fulfill all financial obligations required of me including, but not limited to, rent, program fees, restitution, fines, and supervision fees as required.
- R. I will attend all activities/programs as directed by my assigned Probation Officer or designee and participate to the full satisfaction of my assigned Probation Officer or designee.

**Vermont Department of Corrections
FURLOUGH AGREEMENT**

- S. I will sign any releases or other documents necessary so that my assigned Probation Officer or designee can discuss my progress in all of my Department of Corrections' required programs, including, but not limited to, drug/alcohol treatment and mental health counseling.
- T. I will follow the provisions of my case plan.
- U. I will sign a new or modified Furlough Agreement as directed by my assigned Probation Officer or designee.

Offender's Signature

Date

VT DOC Staff Signature

Date

Vermont Department of Corrections
FURLOUGH AGREEMENT

Special Conditions

The following special conditions may be applied on a case-by-case basis and must be based on the level of risk in the individual case. Each condition being imposed must be tied to a risk-related issue. Check off the conditions being imposed, and have the offender initial.

I will not be in the company of, contact or caused to be contacted anyone that is deemed inappropriate, by my assigned Probation Officer or designee. Including, but not limited to:
_____ *initial*

I will maintain a non-cellular telephone within my residence. I will not have anonymous call rejection, call forwarding, or any other phone service that interferes with my supervision.
_____ *initial*

If I am placed on a prescription drug, I will supply the name of the drug and the doctor's name to my assigned Probation Officer or designee with in 24 hours. I will sign and execute any release deemed necessary so my assigned Probation Officer or designee can verify the source and purpose on medically prescribed drug. I will not to abuse any drug prescription. _____ *initial*

I will abide by any curfew imposed by my assigned Probation Officer or designee. My curfew is _____ *initial*

I will submit a detailed written schedule of my activities as directed by my assigned Probation Officer or designee. _____ *initial*

Other: _____ *initial*

Special conditions for Sexual Offenders apply.
I have received these conditions: _____ *initial*

Special conditions for Domestic Violence Offenders apply.
I have received these conditions: _____ *initial*

Offender's Signature Date

VT DOC Staff Signature Date

**Vermont Department of Corrections
FURLOUGH AGREEMENT**

NOTICE

1. While you are on Furlough, Pre-Approved Furlough (PAF), Reintegration Furlough (RF), Supervised Community Sentence (SCS), or Conditional Reentry (CR) status you are subject to being charged with the crime of escape in accordance with Title 13, chapter 35, Section 1501 if:
 1. You are attempting to elude or evade supervision, or
 2. You leave the state without permission.

2. Should I violate this agreement by traveling to any jurisdiction in or outside the U.S., where I may be found, I hereby waive extradition to the state of Vermont. I will not contest any effort by any jurisdiction to return me to the State of Vermont. I may also be subject to re-payment of the cost of extradition for my return.

3. Should I receive a graduated sanction that includes a period of incarceration, I understand that a conviction of a Major Disciplinary Report (DR), while serving a graduated sanction, may extend my period of incarceration beyond the length of the graduated sanction itself.

My signature below is indication that I have had the conditions read and explained to me and I understand them. I also understand that my release on furlough is a privilege, and that if I violate this agreement I would be subject to graduated sanctions and/or a furlough revocation that possibly could have me serve the entire remainder of my sentence incarcerated. I further acknowledge the waiver of extradition and with my signature acknowledge that I will not contest any effort to return me to Vermont.

Offender's Signature

Date

My signature below is an indication that I have read and explained the attached conditions to the offender. I have also explained to the offender the notice regarding escape and the waiver of extradition issues.

VT DOC Staff Signature

Date

My signature below is an indication that I have authorized the offender indicated above to be released on CR, RF, PAF, or SCS.

Casework Supervisor's Signature

Date

**Vermont Department of Corrections
SPECIAL CONDITIONS FOR SEX OFFENDERS**

Treatment

- You will successfully enroll, participate in, and complete a program for sex offenders approved by your assigned Probation Officer or designee and assume the costs of your treatment.
- You will allow your sex offender treatment provider unrestricted communication with your assigned Probation Officer or designee regarding your attendance, level of participation, and any other information deemed necessary to protect the community.

Victim Contact

- You will not have any contact with your victim(s) (including letters, e-mails, text messages, instant messages, phone calls, tapes, videos, visits, or any form of contact through a third party) until approved by your therapist, the victim (the victim's parents if the victim is a child), the victim's therapist and your assigned Probation Officer or designee.
- You will not have visitation with the victim unless approved by your therapist, the victim, the victim's therapist, the child protective services worker, and your assigned Probation Officer or designee.
- You will not have contact with your non-victim children unless approved by your therapist, child protection worker, and your assigned Probation Officer or designee.

Offense-Specific

- You will not view videotapes, films, or television shows that act as a stimulus for your abusive cycle.
- You will not possess pornographic, sexually stimulating, or sexually-oriented material.
- You will not go to adult book stores, sex shops, or topless bars.
- You will not go to places where children congregate; e.g., parks, playgrounds, arcades, schools, etc.
- You will not possess a camera, video recorder, or any other electronic device that has recording capability; e.g., a cell phone.

**Vermont Department of Corrections
SPECIAL CONDITIONS FOR SEX OFFENDERS**

You will not own or possess a computer at your residence; you will not access the Internet at your place of employment or anywhere else without prior approval from your assigned Probation Officer or designee.

Alcohol & Drugs

You will have an alcohol and/or drug screening and follow all recommendations of the counselor.

You will attend and successfully complete an alcohol and/or drug treatment program, to include residential treatment, as directed by your assigned Probation Officer or designee.

Monitoring

You will submit to periodic polygraph examinations at the direction of your assigned Probation Officer or designee and will be responsible for the cost based on a sliding scale. These polygraph examinations will be used to determine your compliance with supervision and treatment requirements.

You must participate in a plethysmograph examination to determine your sexual arousal to abusive themes. These examinations will be periodic upon your Probation Officer or designees' request and you will be responsible for the cost based on a sliding scale.

Social

You will not associate with felons unless they are in treatment, and/or your therapist and assigned Probation Officer or designee approve of the affiliation.

You will inform all persons with whom you have a significant relationship or close affiliation of your sex offending history. Your therapist and/or assigned Probation Officer or designee will determine who will be informed.

You will not participate in friendships or relationships with women or men who have children under the age of 18.

You will not have contact with persons under the age of 18 unless accompanied by a responsible adult (approved by your therapist and assigned Probation Officer or designee) who is aware of your sexually- abusive pattern.

You will not engage in activities that will bring you into close contact with children.

**Vermont Department of Corrections
SPECIAL CONDITIONS FOR SEX OFFENDERS**

You will not live in an apartment complex that has families with children, in neighborhoods with large numbers of children, or in neighborhoods near parks, schools, playgrounds, etc.

Your employment must be approved in advance by your assigned Probation Officer or designee.

Driving

You will maintain a driving log (mileage, time of departure, arrival, & return; destination; routes travelled; with whom, etc.).

You will not pick up hitchhikers or hitchhike yourself.

You will comply with specified limitations on driving, depending upon your individual criminal history and offense patterns, as directed by your assigned Probation Officer or designee.

You will not drive alone with a female unless approved by your assigned Probation Officer or designee and/or therapist.

Other

Offender's Signature

Date

VT DOC Staff Signature

Date

**Vermont Department of Corrections
SPECIAL CONDITIONS FOR DOMESTIC VIOLENCE OFFENDERS**

Treatment

- You will attend, participate in and complete the Intensive Domestic Abuse Program (IDAP) as outlined in the IDAP Agreement for Services.
- You will attend, participate in and complete a Department of Corrections recognized Batterer Intervention Program (BIP) at your own expense and to the full satisfaction of your assigned Probation Officer or designee.

Victim/Child Contact

- You will not abuse or harass the victim, or cause the victim to be abused or harassed.
- You will not have contact with the victim or cause the victim to be contacted. This includes:
- You will not have contact with your children. This includes:

Type and frequency of contact will be determined by your assigned Probation Officer and the IDAP Treatment Team when relevant and appropriate.

- You will abide by any Temporary/Final Relief from Abuse Orders and any other Family Court orders that pertain to child visitation and support.
- You will abide by any plan established by the IDAP Team with regard to childcare and visitations.

Alcohol & Drug

- You will have an alcohol and/or drug screening and follow all recommendation of the counselor.
- You will attend and successfully complete an alcohol and/or drug treatment program, to include residential treatment, as directed by your assigned Probation Officer or designee.

Driving

- You will not operate a motor vehicle unless approved by your assigned Probation Officer and the IDAP Team.

**Vermont Department of Corrections
SPECIAL CONDITIONS FOR DOMESTIC VIOLENCE OFFENDERS**

Firearms

You will not purchase, possess, or use firearms.

Other:

Other:

Offender's Signature

Date

VT DOC Staff Signature

Date