



MARIN COUNTY

PROBATION DEPARTMENT

Electronic Monitoring (EM) Contract

I understand that I am being placed on the Electronic Monitoring Program under the conditions set forth in this document. **IF I REFUSE TO COMPLY OR FAIL TO FOLLOW THESE CONDITIONS I WILL BE TAKEN TO JUVENILE HALL to serve the remainder of my custody time.**

_____ Electronic Monitoring means **I am not allowed to leave my home except as authorized by the Probation Officer. I must** travel directly to and from school, employment, counseling, church, or any verifiable emergencies. Otherwise, I am expected to be at home.

_____ I understand that while I am a participant of the electronic monitoring, **I am not allowed to have any friends visit me at home or come by the house for any reason.**

_____ While on Electronic Monitoring, I must be able to hear and respond to the doorbell, knocking, or telephone calls so that my presence may be verified by the Probation Department. In addition, I agree to unannounced visits into my home at any time of the day or night by any peace officer or agent designated by the Court for the purpose of verifying my compliance with the Electronic Monitoring conditions; as well as to verify that the monitoring devices are not being tampered with or altered.

_____ **I agree to submit my person, property, residence and vehicle to search and seizure** with or without probable cause at any time of the day or night and by any peace officer.

_____ **I will not possess or have in my person, residence or vehicle any guns, knives or other prohibited weapons.** I further agree to dispose of any item(s) in my house, be it, sporting equipment or tools that can be use as weapons

_____ I agree to answer any questions asked by any Probation Officials concerning my whereabouts. **I will have ALL activities authorized by my Probation Officer at least TWENTYFOUR HOURS** in advance of any activity, not already on my schedule, and I will provide written documentation upon request.

_____ **I understand that I must be under the immediate supervision of my parents or guardians** except during authorized scheduled activities such as school, counseling, or employment.

_____ **I agree to attend school with no unexcused absences or tardies.** Transportation to and from school must be provided by my parents or guardians except as authorized by the Probation Department. I agree to notify my Probation Officer **IMMEDIATELY** if I do not go to school, get out early, or am suspended.

_____ I agree to obey all laws and Orders of the Court, the Probation Officer; as well as the reasonable and proper orders and directions of my parents or guardians.

_____ I understand, **I cannot consume or possess any alcohol, illegal drugs, cigarettes or non-prescribed drugs.** I am aware that upon request by the Probation officer **I will submit to chemical testing** in order to verify my compliance with the electronic monitoring program.

_____ I understand my **WEEKLY SCHEDULE** for the coming week's activity is **due at the Probation Office by 5:00pm on Wednesday** for authorization by the Probation Department. Failing to complete or falsifying a Schedule is a violation of the Electronic Monitoring Program and could result in my return to Juvenile Hall.

_____ I understand if employed locally, I may be allowed to continue my employment upon approval by Probation Officials and providing I am covered by my employers workman's Compensation benefits and insurance. **I understand changes in my work schedule must be verified in advance by my employer and approved by my Probation Officer and I agree to remain at my work location for all breaks and meal periods.** I agree to notify my Probation Officer IMMEDIATELY if I do not report to work as scheduled, get off work early, or am terminated. I understand transportation to and from work must be provided by my parent(s) or guardian(s) except as authorized by Probation Officials.

_____ I understand that upon approval my Probation Officer I may be allowed to seek employment if not employed. I agree to provide weekly written verification of my job search contacts.

_____ I understand that upon approval my Probation Officer I may attend Counseling or AA/NA meetings as ordered by the Court. Also, I may attend the church/temple of my choice one day per week, on the day of worship, for up to 3 hours. I agree to provide the name of my church/temple, address, phone number and name of the religious figure presiding over the religious services.

_____ I agree to use the electronic monitoring equipment to verify my compliance with the conditions of the Electronic Monitoring Program imposed by the Probation Officials and/or the court. I agree to wear a tamper proof non-removable transmitter on my ankle 24 hours per day for the duration of my detention. I agree to contact my Probation Officer **IMMEDIATELY** if I am aware of any problems with the equipment.

_____ I understand that if I flee, I will be considered an escapee, and will be reported to the appropriate law enforcement authorities for proper action. I recognize that this act may constitute another criminal offense subject to further prosecution.

_____ I understand as a condition of Electronic Surveillance, I am responsible for the equipment for the duration of my program participation. **If any part of the equipment is ever lost or damaged, and this is caused by either my own or my household's negligence, I agree to pay for the repair or replacement of this equipment.** I understand that opening or tampering with the equipment will be considered a program violation and will result in my return to Juvenile Hall. If the equipment is destroyed, or intentionally damaged by me, I may be subject to further criminal prosecution.

_____ I have been instructed on the correct use of the electronic monitoring equipment and fully understand its use.

_____ I have received a copy of the Electronic Surveillance conditions and reviewed them with my Probation Officer. I now understand all the Electronic Surveillance conditions and agree to comply with them.

_____ I understand that all persons residing in my home must be aware of my placement on the Electronic Surveillance Program. They must be aware of my program requirements as stated in this document and they must agree to support my responsibilities during my detention period.

Program Participant Signature

Date

PARENT(S)/GUARDIAN(S):

- I have read the above and understand the requirements and rules of the Electronic Monitoring Program.
- I am willing to support and assist our child in their compliance with and adherence to the Electronic Surveillance Program and its guidelines.
- I agree to communicate with the Probation Department and notify the Probation Officer of any program violations that I am aware of.
- I agree to allow the monitoring equipment to be placed in our home and am willing to comply with all guidelines stated in this document.
- I further understand and agree to **pay a \$25.00 administrative fee and a \$10.00 per day fee for the duration my child's participation in the Electronic Monitoring Program.**
- I also agree to contact Central Collections, 3501 Civic Center Drive Room 217, San Rafael, CA 94903, telephone 415-499-7555 upon receipt of my bill in order to make payment arrangements.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Probation Officer/Group Counselor Signature

Date