

Vilas County Jail Huber 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 \$25.00 non-refundable cash or money order for the "Processing Fee"
 - The "Employment Verification Form" must be filled out 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.

Applicant Information:

Applicant name (Last, First, MI)				
Address:			Apt Number:	
City:			State:	Zip:
Home phone:		Work Phone:		Cellular phone:
Weight:	Height:	Hair color:	Eye color:	Drivers license # & state issued:
Race:	Sex:	Birth date:	State of birth:	Soc. Sec #:

Commitment Information:

Length of sentence:	Offense:	Court:	Judge:
Length of sentence:	Offense:	Court:	Judge:

Residence Information:

Have you been charged with battery or domestic violence? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes list name of victim:		If so does the victim live with you? Yes <input type="checkbox"/> No <input type="checkbox"/>	
List all other persons living at the residence where you are living:			
Name	Sex	Age	Relationship

Vilas County Jail Verification of commitment and residence: (To be completed by jail staff only)

Person Contacted:	Contacted By:	Date and Time:

Emergency Contact Information:

Name (Last, First, MI)			Relationship:
Address:	State:	Zip:	Phone:

Court Ordered Meeting Schedule (For example: AA, Anger Management, etc.):

Type of meeting:	Day of week:	Meeting address:	Beginning Time:	Ending Time:

Provide written verification of any counseling dates when you return this application
Vilas County Jail Verification of meeting schedule: (To be completed by jail staff only)

Person contacted:	Contacted by:	Date and Time:

Applicant Employment Information:

Employer:

Employment Address:	City:	State:
Employment Phone Number:	Job Title:	
Supervisor's Name:	Length Employed:	Rate of Pay per Hour:
When are you paid:	How: (Cash, check, direct deposit)	
Job site location if other than employment address listed above:		

Is your employer related to you? Yes No If yes how?

Vilas County Jail Verification of employment: (To be completed by jail staff only)

Person contacted:	Contacted by:	Date and Time:

Transportation Information:

How do you commute to work?	How far is your commute from home to work?		
How long does it take one way?	Do you have a valid drivers license? Yes <input type="checkbox"/> No <input type="checkbox"/>	Verified by and date:	
If you do not have a license, who will be driving you?		Driver's License Number and state issued:	
Vehicle License #:	State:	Make:	Model:
			Year:
Auto Insurance Company Name: (Provide copy of proof of insurance with application)			Agents name:
Policy number:	Agents Phone number:	Agents Fax number:	

Medical Information:

Name of Doctor/ clinic:	Phone number:
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List any illegal drugs taken recently

What prescribed medication are you currently taking?

Have you ever attempted suicide? Yes No When?

Do you have mental health problems?

How often do you drink alcohol?

Do you have a history of seizures?

Are you pregnant? Yes No If yes what is your due date?

(To be completed by jail staff only)

Arrest History:

Have you ever been rejected or revoked from a home detention or work release program? Yes No

Have you ever been charged or convicted of escape? Yes No

Have you ever been on Huber release before? Yes No If yes where?

Vilas County Jail contact with work release programs: (To be completed by jail staff only)

Person contacted:	Contacted by:	Date and Time:

Charges or Cases Pending:

Arrest Date:	Arresting 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 No 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 verification information: (To be completed by jail staff only)

Person contacted:	Contacted by:	Date and Time:

Huber Program Information and Conditions:

Costs: Initial each (witnessed by Corrections Officer) acknowledging understanding.

- ___ **Huber fees:** Participation as a Huber shall be set at a daily fee of \$17.00 which the participant agrees to pay by cash or money order only, made out to the "Vilas County Sheriff's Department". At least two weeks of fees must be paid in advance if your sentence is over 30 days. If your sentence is under 30 days the fees must be paid in full prior to placement.
- ___ **Paychecks:** The Sheriff or his designee in accordance with State Statutes 303.08 will control all monies earned by the participant. Therefore, any paychecks must be turned over to the Sheriff's Department.
- ___ **Processing fee:** A one time non-refundable fee of \$25.00 must be submitted at the time this application is turned in.
- ___ **Drug screening fee:** The first drug test is included in the processing fee. If at any time you test positive for illegal drugs a \$20.00 fee will be required for each subsequent test you request. (You will not be allowed to participate as a Huber until your test is negative for all illegal drugs.
- ___ **Medical Care:** The Vilas County Jail is **not** responsible for you medical care or any medications while you are participating as a Huber. **All medications and appointments must be approved by the Jail Nurse and Sergeant.**

Huber Program Terms and Conditions:

Eligibility Procedure

1. An applicant must be sentenced for a criminal traffic offense, misdemeanor or felony by the Vilas County Circuit Court.
2. The applicant's jail classification must allow for Huber.
3. An applicant must be free of existing warrants and holds. Serving a sentence with Huber after being revoked from Probation or Parole is prohibited.
4. Applicants must provide adequate documentation to the Huber 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 Huber. Such proof will include pay and tax records. This requirement also applies to self-employed inmates applying for Huber.
9. Applicants must agree to abide by all Vilas County Jail, Huber rules. Any extensive history of Vilas County Jail rule violations may determine an applicant to be disqualified from Huber and their Huber privileges will be revoked.
10. Applicants must complete any recommended assessments and follow through with any recommendations of the assessments if so recommended.
11. 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.
12. Applicants must agree to pay all Huber fees as directed by the Jail Staff.
13. 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.
14. Applicants may be approved to meet the special needs of the Vilas County Jail.
15. Participation in the Huber Program is strictly a privilege and will be revoked any time a violation warrants such action. Huber Application form must be filled out entirely and approved by Jail Staff.
16. Any changes to address, telephone number, or employer must be communicated to the jail staff prior to admission to the program.

Placement Site Requirements

The following placement site requirements will apply to all persons placed on Huber in order to ensure public safety and order. Initial each (witnessed by Corrections Officer) acknowledging understanding.

1. ___ Participants may not have firearms in the home while the Inmate is under the Huber Release Program.
2. ___ Participants may not have alcoholic beverages stored at the home/Work Location or possess such items while the inmate is under the Huber Release.
3. ___ Participants cannot possess any item or substance that is illegal.
4. ___ 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 Huber Release.
5. ___ All information must be provided regarding any individuals who reside with the participant and the "Consent to Search" form must be filled out and signed by all adults living in the home.
6. ___ No unauthorized visitors will be allowed while participating in the Huber Release.
7. ___ Participants must agree to the random search of their person, home, and vehicle while participating in Huber Release.

Inmate Conduct

The following rules will be followed by all participants placed on Huber Release in order to maintain an orderly environment with clear expectations of behavior and systems of accountability. Initial each (witnessed by Corrections Officer) acknowledging understanding.

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 Huber Program.
4. ___ No participant can threaten, verbally or physically, any member of the public, correctional staff, or law enforcement official.
5. ___ The participant in the Huber program shall show respect to all correctional staff and law enforcement officials.
6. ___ No participant will communicate false information to any correctional or law enforcement official.
7. ___ 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.
8. ___ 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 Jail staff or Jail Administrator.
9. ___ 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.
10. ___ Participants must request, in writing, any changes in their work schedule. Changes cannot occur until approved by the Jail staff.
11. ___ No participant is permitted to work more than 6 days per week or be away from the detention site more that 12 hours per day.
12. ___ Participants who quit, or are terminated from their job, must notify the Correctional Staff as soon as possible following the job action.
13. ___ 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.
14. ___ 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 Jail staff and are at the discretion of the Jail staff.

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 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 Huber status 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.

Communication

A system of communication will be established in order to provide a means for a participant to communicate with Jail staff during their participation in Huber. Initial each (witnessed by Corrections Officer) acknowledging understanding.

1. Participants will make contact with the Jail: 715-479-0617 (option #3)
 - a. ___ Upon arrival at place of employment.
 - b. ___ Any time required to leave the place of employment for a job related errand.
 - c. ___ Upon arrival at errand location and upon leaving that location.
 - d. ___ Upon arrival back at place of employment.
 - e. ___ Upon leaving place of employment to return to the Jail.
2. ___ All requests should be written and delivered to the jail. The request will be directed to the appropriate individual.
3. ___ 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.

4. ___ During participation on Huber, 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.
5. ___ When informal resolution is not possible, written complaints and decision appeals are to be submitted in accordance with chain of command.
6. ___ Written complaints not filed in accordance with the proper chain of command will be dismissed.
7. ___ The applicable staff member will review all complaints properly submitted and forwarded.
8. ___ 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.
9. ___ All requests for non-emergency medical treatment must be in written form.
10. ___ The participant is responsible to notify the correctional staff as soon as feasible about all emergency medical care that takes place while participating on Huber Release.
11. ___ Both emergency and non-emergency medical requests must be accompanied with appropriate documentation as soon as possible.
12. ___ 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.

Acknowledgements:

I hereby acknowledge that all information that I have supplied on this application is accurate. I also understand that any intentionally misleading or false information is reason for automatic denial in participation in the Huber Release Program. Furthermore, by signing this application I acknowledge that I have read and agree to all the terms and conditions of the Huber Release Program and will abide by a said terms and conditions and understand that any violations can result in revocation of my placement in the Huber Release Program as well as revocation of my Huber privileges granted to me by the court.

Participants signature

Date/Time

Witness signature (Corrections Officer)

Date/Time