

**INMATE GPS ORIENTATION**  
**Guidelines and Procedures**

**FAILURE TO COMPLY WITH THE FOLLOWING CONDITIONS MAY RESULT IN YOUR TERMINATION FROM THE GPS PROGRAM. THIS COULD RESULT IN YOUR RECLASSIFICATION TO A HIGHER SECURITY FACILITY. PLEASE INITIAL BY EACH OF THE FOLLOWING PARAGRAPHS TO ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTOOD ITS CONTENT.**

1. \_\_\_\_\_ You will not tamper with the Electronic Monitoring Tracking Device in any manner or for any reason.
2. \_\_\_\_\_ You will connect your Electronic Monitoring Tracking Device to your charger a minimum of two hours per day.
3. \_\_\_\_\_ You will contact your officer immediately when you receive a 10 second vibration from the Electronic Monitoring Tracking Device and all three lights are blinking.
4. \_\_\_\_\_ You will remain current with all payments to the agency (if applicable).
5. \_\_\_\_\_ You will submit work verification and verified work schedules upon request from your supervising officer. You will obtain authorization for a schedule change a minimum of 12 hours in advance from a supervising officer.
6. \_\_\_\_\_ You will allow the equipment to be inspected upon request, which could result in missed work, or alteration of your daily schedule.
7. \_\_\_\_\_ You are responsible for the care and damage to the equipment that is issued to you, other than normal wear and tear at the discretion of your supervising officer. You could be held criminally responsible for any equipment loss or theft.
8. \_\_\_\_\_ You understand that all movement will be tracked and stored as an official record.
9. \_\_\_\_\_ You will follow all established home, work, or restricted area rules that have been established. Deviation from said schedule will be grounds for violation.
10. \_\_\_\_\_ You will respond to all messages that are sent to your Electronic Monitoring Tracking Device as soon as you receive them.
11. \_\_\_\_\_ You are responsible for obtaining home internet with Wi-Fi connection or a hot spot on your cellular device if your equipment is not able to connect through the cellular network.

The rules of the GPS Program have been provided to me. I fully understand what is expected of me and the possible consequences of any failure to comply with these rules.

My signature confirms my receipt of the following equipment:

Electronic Tracking Device \_\_\_\_\_

Device Charging Cord and Wall Plug: \_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_  
(Inmate Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Supervising Officer's Signature)

\_\_\_\_\_  
(Date)