

## INMATE GPS ORIENTATION Guidelines and Procedures

### FAILURE TO COMPLY WITH THE FOLLOWING CONDITIONS MAY RESULT IN:

- **TERMINATION FROM THE GPS PROGRAM**
- **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 SMART®ONE – Wearable Miniature Tracking Device or charger in any manner or for any reason. \_\_\_\_\_
2. You will connect your SMART®ONE – Wearable Miniature 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 vibrate from the SMART®ONE – Wearable Miniature 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 must obtain authorization for a schedule change as soon as possible. \_\_\_\_\_
6. You will allow the equipment to be inspected upon request, which could result in missed work or alteration of your daily schedule. \_\_\_\_\_
7. Beyond normal wear and tear, you are responsible for the care of and damage to the equipment that is issued to you. 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 and/or calls that are sent to you as soon as you receive them. \_\_\_\_\_

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:

**SMART®ONE – Wearable** Miniature Tracking Device and Power Cord/Charger

Inmate Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervising Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_