

General Conditions of Parole

STATE OF CALIFORNIA
NOTICE AND CONDITIONS OF PAROLE (Page 1)
CDCR 1515 (Rev. 05/07)

DEPARTMENT OF CORRECTIONS AND REHABILITATION

When released from custody, you will be on parole for a period of _____ years. You must obey these conditions of parole. If you do not, you may be arrested, returned to prison or have to serve more time on parole.

GENERAL CONDITIONS OF PAROLE

1. Criminal Conduct

- You must obey all laws. The BPH may find that you have violated parole, even if you are not convicted in court and even if you are not charged with a crime.
- If you are arrested or cited by any peace officer for any misdemeanor or felony, you must tell your parole agent right away. You must do this even if you are released.

2. Instructions

- You must report to your parole agent the first working day after your release unless you have written permission to report later.
- You must do what your parole agent tells you to do.
- If another agency has placed a hold on you, you may be released to their custody. If you are released from their custody before the end of your parole period, you must contact the nearest California parole office immediately. They will tell you what to do.

3. Searches

- Any parole agent or peace officer can search and seize you, your property, and any property under your control at any time of the day or night with or without cause.
- They can also search your residence of record and where you live.

4. Travel

- You cannot go more than 50 miles from your home unless you have written permission from your parole agent.
- You cannot leave the county where you live for more than 2 days (48 hours) without written approval from your parole agent.
- You cannot leave California without written approval from your parole agent.
- If you are arrested in another state, you agree to give up your right to a hearing on whether you can be brought back to California.

5. Residence and Employment

- You must tell your parole agent where you are living and where you are working.
- You must tell your parole agent before you change where you live.
- You must tell your parole agent within 3 days if you lose, quit, or change your job.
- You must tell your parole agent within 3 days if your work address changes.

6. Weapons

You shall not own, use, have access to, or have under your control:

- Any kind of gun.
- Anything a reasonable person would think looks like a gun.
- Any ammunition that could be used in a gun.
- Any weapon not allowed by State or Federal law.
- Anything a reasonable person would think could be used as a weapon.
- Any knife with a blade longer than 2 inches.
 - You can have kitchen knives, but they must be kept at your house in the kitchen.
 - You can have knives you need for work, but they can only be used and carried during normal work hours for your job with your parole agent's approval.
- A crossbow of any kind.

7. Failure to Sign Conditions of Parole

- You shall sign these conditions of parole and any special conditions imposed by your correctional counselor, parole agent, or the BPH. Failure to sign any conditions of parole will result in your being returned to custody.

CDC Number:	Inmate/Parolee Printed Name (Last, First, MI):	Inmate/Parolee Signature:	Date Signed
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Partners for Formerly Incarcerated People

A publication by Starting Over Strong

STATE OF CALIFORNIA
NOTICE AND CONDITIONS OF PAROLE
CDC 1515 (Rev 05/01)

DEPARTMENT OF CORRECTIONS

You will be released on parole effective _____, 20____ for a period of _____. This parole is subject to the following notice and conditions. Should you violate conditions of this parole, you are subject to arrest, suspension and/or revocation of your parole.

You waive extradition to the State of California from any state or territory of the United States or from the District of Columbia. You will not contest any effort to return you to the State of California.

When the Board of Prison Terms determines, based upon psychiatric reasons, that you pose a danger to yourself or others, the Board may, if necessary for psychiatric treatment, order your placement in a community treatment facility or state prison or may revoke your parole and order your return to prison. You and your residence and any property under your control may be searched without a warrant by an agent of the Department of Corrections or any law enforcement officer.

If another jurisdiction has lodged a detainer against you, you may be released to the custody of that jurisdiction. Should you be released from their custody prior to the expiration of your California parole, or should the detainer not be exercised, you are to immediately contact the nearest Department of Corrections' Parole and Community Services Division Office for instructions concerning reporting to a parole agent.

You have been informed and have received in writing the procedure for obtaining a Certificate of Rehabilitation (4852.21 PC).

CONDITIONS OF PAROLE

1. SPECIAL CONDITIONS MUST: a) Relate to the crime for which you were convicted, b) Relate to conduct which is itself criminal, c) Prohibit conduct which may be related to future criminality. You are subject to the following special conditions: _____

Reasons for the imposition of special conditions of parole: _____

I acknowledge my special conditions of parole.

Parolee's Initials _____

SIGNATURE OF UNIT SUPERVISOR _____

DATE SIGNED _____

2. RELEASE, REPORTING, RESIDENCE AND TRAVEL: Unless other arrangements are approved in writing, you will report to your parole agent on the first working day following your release. Any change of residence shall be reported to your parole agent in advance. You will inform your parole agent within 72 hours of any change of employment location, employer or termination of employment.

3. PAROLE AGENT INSTRUCTIONS: You shall comply with all instructions of your parole agent and will not travel more than 50 miles from your residence without his/her prior approval. You will not be absent from your county of residence for a period of more than 48 hours and not leave the State of California without prior written approval of your parole agent.

4. CRIMINAL CONDUCT: You shall not engage in conduct prohibited by law (state, federal, county or municipal). You shall immediately inform your parole agent if you are arrested for a felony or misdemeanor crime. Conduct prohibited by law may result in parole revocation even though no criminal conviction occurs.

5. WEAPONS: You shall not own, use, have access to, or have under your control: (a) any type of firearm or instrument or device which a reasonable person would believe to be capable of being used as a firearm or any ammunition which could be used in a firearm; (b) any weapon as defined in state or federal statutes or listed in California Penal Code Section 12020 or any instrument or device which a reasonable person would believe to be capable of being used as a weapon as defined in Penal Code Section 12020; (c) any knife with a blade longer than two inches, except kitchen knives which must be kept in your residence and knives related to your employment which may be used and carried only in connection with your employment; or (d) a crossbow of any kind.

6. You shall sign this parole agreement containing the conditions of parole specified in Board of Prison Terms (BPT) Rules Section 2512 and any special conditions imposed as specified in BPT Rules Section 2513. Penal Code Section 3060.5 provides that the BPT shall revoke the parole of any prisoner/parolee who refuses to sign the Notice and Conditions of Parole. You have the right to appeal the special conditions of parole. Special conditions imposed by the Parole and Community Services Division may be appealed pursuant to California Code of Regulations (CCR), Section 3084 and 3085. Special Conditions of parole imposed by the BPT may be appealed pursuant to CCR, Section 2050.

I have read or have had read to me and understand the conditions of parole as they apply to me.

CDC NUMBER	PAROLEE NAME (Print or Type)	PAROLEE SIGNATURE	DATE SIGNED

TO BE COMPLETED BY STAFF:

Does the inmate/parolee have a qualifying disability requiring effective communication? Yes No

If yes, cite the source document and/or observations: _____

What type of accommodation/assistance was provided to achieve effective communication to the best of the inmate's/parolee's ability? _____

STAFF NAME (Print or Type)	STAFF SIGNATURE	DATE SIGNED

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General Conditions of Probation

1. Submit to being supervised by and cooperate with the Butte County Probation Department. Follow, in all respects, any lawful instructions given to you by the probation officer.
2. You must report to the probation officer in such a manner and at such times as shall be required and furnish any information about yourself that may be lawfully demanded.
3. You must always keep the probation officer informed as to your exact address of residence as well as to the names of all persons residing with you and their relationship to you.
4. You must maintain your residence as approved by the probation officer and not change your residence without the prior written approval of the probation officer.
5. Do not associate with anyone known to you to be on probation or parole, except with the permission of the probation officer.
6. You must not leave the State of California without having first received written permission from the probation officer to do so. By accepting probation herein you agree to waive extradition to the State of California from any jurisdiction in or outside of the United States where you may be found and also agree that you will not contest any effort by any jurisdiction to return you to the State of California.
7. If deported or caused to return to your country of citizenship, you are not to enter the United States illegally. If you enter the United States legally or illegally, you are to report in person to the Butte County Probation Department within five (5) days of entry into the United States.
8. If applicable, authorize the probation officer to make a copy of the diagnostic study and recommendation, pursuant to Penal Code §1203.03 available to any psychiatrist, psychologist, or counselor who is treating/counseling you.
9. You must cooperate in any psychiatric or psychological testing or counseling which may be suggested by the probation officer and authorize the release of any type of reports or records (written or oral) from any psychiatrist, physician, psychologist, or counselor to the Court, Probation Department, and District Attorney.
10. If directed to do so by the probation officer, successfully participate in educational course work and/or vocational training.

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11. If directed to do so by the probation officer, actively seek and maintain lawful employment and earn money for the support of yourself and your dependents, per PC §1203.1(d). You must keep the probation officer informed of the exact name and address of your employment.
12. You must obey all laws, ordinances, legal regulations. You must also comply with any co-existing Court orders pertaining to you, including civil restraining, family support orders and you must comply with all Department of Motor Vehicle regulations with respect to operating any motor vehicle.
13. You must report to the probation officer, no later than the next working day, any arrests or any contacts with or incidents involving any peace officer.
14. Pay fines, restitution and fees as specified on the FINANCIAL OBLIGATION PAGE attached hereto and incorporated herein by this reference, and as ordered by the Court. When requested, submit to the probation officer/Court Compliance Unit a complete written financial accounting, including all bills, receipts and expenditures written for the time period specified, for the purpose of facilitating the ability to pay assessments and/or establishing fine/restitution payment schedules.
15. Report, in person, to the Butte County Probation Department Adult Supervision Unit at 3:00 p.m. on the first Tuesday after you are granted probation, or you are released from jail (either time served or placed on a jail program such as SWAP, ESP, work furlough or parole) unless otherwise directed by the Court.
16. (Prop. 36 Cases) Waive any confidentiality relative to his/her progress in said program of education, treatment, or rehabilitation, to the limited extent that any information relative to such progress shall be available only to the Court, Defendant, District Attorney, Probation Officer and the treatment agency. Execute any necessary documents in connection therewith.

Special Conditions of Probation

Felony Misdemeanor Formal Probation Conditional/Revocable
Release

Obey all laws and general conditions ordered by the Court.

1. Serve _____ days of the probationary term, with credit for time served, to wit _____
actual days, commencing:

FORTHWITH remanded to custody of Sheriff REPORT TO JAIL on or before _____

CUSTODY ALTERNATIVE PROGRAMS NOT AUTHORIZED

(SWAP, Work/School Furlough, ESP, Parole)

This term of incarceration to be served CONSECUTIVELY

CONCURRENTLY to any other sentence.

The probation officer is authorized to release this probationer from the Butte County Jail for the limited purpose of facilitating an evaluation for and/or placement into a licensed residential substance abuse treatment program. If so placed, the defendant shall be given credit for time served.

2. COMPLETE _____ hours of COMMUNITY SERVICE and pay applicable fees in a manner determined by the Court Compliance Unit.

3. Submit to search of your person, property, residence, vehicle, or any container under your control or in which you have an interest at any time, night or day, by any peace officer with or without a warrant of arrest, search warrant, reasonable or probable cause, your then presence or your then consent, for the purpose of determining compliance with the conditions of probation.

4. Totally refrain from the use, control, or possession of any controlled substance unless with a current prescription from a licensed physician. Do not possess any narcotic paraphernalia nor knowingly associate with anyone who has ever been convicted of any criminal offense involving these substances, nor anyone using or selling controlled substances, without permission of the probation officer. No Prop 215 marijuana recommendations allowed.

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- 5. Totally refrain from the use or possession of any alcoholic beverages and not knowingly enter any place of business or location where alcohol is the primary item for sale or use. Do not ingest or use any item containing alcohol.
- 6. Participate and cooperate at your own expense in any approved medical/drug therapy treatment program (Antabuse, etcetera), to be administered and monitored as directed/approved by the Probation Officer.
- 7. Submit to any testing, treatment, or program designed to detect the presence of alcohol or controlled substance. Do not ingest any poppy seeds or supplements containing creatinine. You may not use or possess any devices designed to alter, mask or negate drug testing results. You may not falsify any drug test. Said testing to be at probationer's expense, per PC §1203.1ab.
- 8. Enroll in, pay for and successfully complete a 12 Step or other approved self-help program as directed, and not terminate participation in said program without the permission of the Court or your probation officer.
- 9. Within seven (7) days of being granted probation or released from custody, provide written proof of enrollment in, payment of and, thereafter, successful completion of, within one year from the date you are granted probation, an approved BATTERER'S TREATMENT PROGRAM. Do not terminate participation in the program without the permission of your Probation Officer. While in the program, you are subject to drug/alcohol testing by program staff. As to case:_____.
- 10. Within seven (7) days of being granted probation or released from custody, provide proof of enrollment in, payment of, and thereafter, successful completion of a _____ program/class, and do not terminate your participation in the program/class without the permission of the Court or your Probation Officer. As to case:_____.
- 11. Enroll in, pay for, and successfully participate in a SEX OFFENDER SPECIFIC THERAPY program, including an AIDS Education Program, as directed by your Probation Officer. Do not terminate participation in the program without the permission of the Court or your Probation Officer.
- 12. Do not associate or have any contact with any minor (child) under the age of eighteen (18) years, except in the immediate presence of a "responsible adult" approved in advance by your Probation Officer. For the purposes of this order _____ SHALL NOT be qualified to act as a "responsible adult." Exceptions:_____

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13. Do not cohabit with any person who has the care and custody of any minors (children). Do not enter or visit places or be involved in any activity where children are primarily involved, found, or frequent (i.e. schools, playgrounds, video arcades, children's parks, or other such locations/activities, which attract/involve children) except in the immediate presence of a "responsible adult" approved in advance by your Probation Officer. Do not own or possess any material suggesting or involving child nudity or of children depicted, shown, or involved in a sexual context. Exceptions: _____
14. Do not in any way, personally, or through any third party, contact, annoy, harass, harm, or communicate with: _____. Comply with any existing §136.2 PC order.
15. Surrender driver's license to the Court Clerk or Probation Officer, to be returned to the California Department of Motor Vehicles.
16. Do not operate any motor vehicle with any amount of alcohol/controlled substances in your blood, unless with a current prescription from a licensed physician.
17. Enroll in, pay for and successfully complete DUI school SB-38
 _____, which has been certified by the State of California, as directed by the probation officer.
18. Immediately comply with the requirements of H&S 11590 and register as a narcotic offender.
19. Submit to HIV testing pursuant to Penal Code §1202.1 at your own expense and as directed by the Court or your Probation Officer.
20. You are to enter and complete a residential substance abuse treatment program as specifically approved by your probation officer. Do not leave the program or otherwise terminate your participation in the program without the permission of the program staff and your probation officer. While in the program, you are subject to warrantless search and drug/alcohol testing by program staff. You must follow all program rules as a condition of probation. Upon graduating from the program, you are to participate in any "aftercare" program recommended by program staff. Report in person to the Butte County Probation office in Oroville at 1:00 p.m. on the first Tuesday after you leave the program for any reason. **No custody time credits will accrue for participation in a residential treatment program, as a condition of probation.**
- 20a. You are to enter and complete a residential substance abuse treatment program as specifically approved by the court or your probation officer. Do not leave or otherwise

terminate your participation in the program without the permission of program staff and the court or your probation officer. While in the program, you are subject to warrantless search and drug/alcohol testing by program staff. You must follow all program rules as a condition of probation. Upon graduating from the program, you are to participate in any “aftercare” program (to include a 12 Step or other approved self-help program) as recommended by program staff. For those defendants on formal probation: Report in person to the Butte County Probation officer in Oroville at 1:00 pm on the first Tuesday after you leave the program for any reason. For all defendants: No custody time credits will accrue for participation in a residential treatment program, as a condition of probation.

- 21. Do not possess any checks other than your paycheck. Maintain no accounts on which a check can be drawn.
- 22. You are not to own or possess any credit cards or access cards not in your name.
- 23. Cooperate with Children’s Services Division and/or the Butte County Juvenile Court relative to care and custody of your minor children. Comply fully with any Court order Family Maintenance or reunification plan or agreement, addressing the care, custody, and/or welfare of your children.
- 24. Pursuant to the guidelines of §1210 PC, actively participate in and successfully complete an approved drug treatment program(s) as directed by the Court or your probation. Comply with the recommended treatment program and classes. Do not terminate participation in said program/class without the permission of the Court, your probation officer and program staff.
- 25. Do not enter or be on the premises of _____ located at_____.
- 26. Immediately familiarize yourself and hereafter comply with the requirements of §186.30 PC.
- 27. As a result of your conviction, you shall be designated as a habitual traffic offender for a period of _____ years, subsequent to the conviction. Your driving privilege shall be revoked for a period of _____ years.
- 28. Pursuant to §23575(a)(1) VC, you shall install a certified ignition interlock device on any vehicle that you own or operate for a period of _____ years.
- 29. Pursuant to §_____ VC, your California Driver’s license shall be suspended by the Department of Motor Vehicles for a period of _____ years.

30. Enroll in, pay for and successfully complete a **substance abuse educational class** an **outpatient substance abuse treatment program** an **intensive outpatient (day treatment) program**, or a 12 Step or other approved self-help program as directed, and not terminate participation in said program/class without the permission of the Court or your Probation Officer.
31. Attend and complete a parenting course as approved by your Probation Officer. Proof of completion to be filed with the Court no later than _____.
32. Attend a minimum of meeting(s) per week of 12 Step or other approved self-help programs and maintain a log of your attendance. Bring logs to all court, probation and treatment appointments. Obtain sponsor and work the steps.
33. You are to obtain your high school equivalency certificate or General Equivalency Diploma (G.E.D.).
34. You are to obtain a valid California Driver License.
35. You are to contact Touchstone Prenatal Project and enroll in the program no later than _____. You are to attend and complete said program and are ordered to comply with all Touchstone directives.
36. You are to reside and participate in the **Salvation Army Treatment Program** in Sacramento. You are to be released from the Butte County Jail on _____ no later than _____ to _____ who will transport you **directly** to said program. **No stops will be authorized during transport.** You are to comply with all directives of the program and are not to terminate participation in said program without the permission of the Court Probation Officer.
37. The defendant is to report to the Probation Department on _____ at _____ for indoctrination and appear in Court for a review hearing on _____ at _____. As to case:_____.
38. Refrain from residing in a living environment that you know has not been approved by your probation officer as a clean and sober living environment.
39. Within 72 hours of being granted probation or your release from jail (either time served or when placed on a jail program i.e. SWAP, ESP) report to the Butte County Behavioral Health Department to be assessed pursuant to §1210 PC and comply with the recommended treatment program/class (substance abuse education, outpatient, intensive outpatient, residential) as determined by the assessment. Do not terminate participation

in said program/class without the permission of the Court, the Butte County Behavioral Health Department, and your Probation Officer.

40. Within 72 hours of being granted probation or your release from jail (either time served or when placed on a jail program i.e. SWAP, ESP) report to the _____ and cooperate in any psychiatric or psychological treatment, testing, or counseling which may be suggested or recommended by _____. You must authorize the release of any type of reports or records (written or oral) from any psychiatrist, physician, psychologist, or counselor to the Court, Probation Department, and District Attorney's Office. Ingest all medications as recommended and prescribed by _____ and do not terminate the use of such medication, or your participation in counseling or treatment, unless approved by your Probation Officer and _____ staff.

41. The defendant SHALL NOT:

Be a member of any gang; and SHALL NOT associate personally or in writing, nor communicate directly or indirectly, with any person known by the defendant to be associated with, or a member of, any gang; 'any item' indicative of a criminal street gang SHALL NOT be owned, possessed, worn, displayed, nor produced by the defendant at any time for any reason; and the defendant SHALL NOT be in any vehicle, residence, room, structure, or location where 'any item' indicative of a gang is present, 'any item' included clothing, paper, documents, compact disc, music videos, DVDs, photographs, lists, drawings, monikers, colors, numbers, indicia, or insignia in any form, computer web page sites, books, newspaper articles more than 10 days old, or any writing as defined in the California Evidence Code section 250, known by the defendant, and any law enforcement or Probation Officer, to be: commonly associated with, as indicia of, which depict images of, or contain information about, any criminal street gang; and SHALL NOT obtain new tattoos, markings, scars, or body piercing which depict any indicia or image consistent with a criminal street gang; and SHALL NOT display any hand signs of gang significance known to be such by the defendant and law enforcement or a Probation Officer; and SHALL NOT possess a knife with a blade longer than 2 inches unless it is a kitchen knife possessed in the defendant's residence.

The defendant SHALL:

Submit to search and seizure, day or night without probable cause, without a search warrant, by law enforcement or probation, or any area over which the defendant had/has access, dominion, or control for compliance of the prohibitions listed above; and

SHALL forfeit any and all items, as described above, seized; and SHALL submit to photographs of tattoos by any law enforcement officer.

The term 'gang' means:

A "criminal street gang" as defined in the California Penal Code sections 186.22(e) and (f). Any violation of any of these terms subjects the defendant to additional penalties as well as revocation of probation.

"Possession" includes:

Personally possessing, access to, or control of the prohibited item(s).

By accepting probation:

If the defendant disagrees with a directive of the Probation Officer, the burden is on the defendant to return to Court to request clarification. It is the obligation of the defendant to follow the direction of the Probation Officer until any subsequent hearing on the directive.

- 42. Enroll in, pay for and successfully complete an AIDS Education Class, and not terminate participation in said class without the permission of the Court or your Probation Officer.
- 43. Pursuant to §296(a)(1) PC and/or Proposition 69, you shall be required to provide two specimens of blood, a saliva sample, right thumbprints, and a full palm print impression of each hand for law enforcement identification analysis.
- 44. You shall not own, use, have access to, or have under your control any knife with a blade longer than two inches, except kitchen knives, which must be kept in your residence kitchen, and knives relative to your employment, which may be used and carried only in connection with your employment.
- 45. Do not be employed in any capacity, either paid, or unpaid, in the planning or participation at any level, in any public or private social gathering, at which alcohol, controlled substances, or minors are involved and present. Exception: Defendant's immediate family holiday events.
- 46. Do not own, possess, have control over, transport, carry, or have in your residence any type of scanner(s) or device used to intercept telephone calls or radio frequencies used by public agencies.
- 47. Do not, in any way, participate in fundraising projects or have employment involving direct access to money or financial accounts without the prior approval of your Probation Officer.

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- 48. Do not knowingly enter any establishment, which includes all casinos, where gambling is the primary item of business. You are not to gamble in any way. Enroll in, pay for, and successfully complete a counseling program pertaining to gambling, which may include a 12 Step or other approved self-help program as directed, and not terminate your participation in said program without the permission of the Court or your Probation Officer.
- 49. Do not, except with the written permission of your Probation Officer, participate as an owner, partner, or employee in any related sales or service business.
- 50. Do not own, possess, have control over, transport, carry, or have in your residence at any time, any item which could reasonably be considered as a dangerous or deadly weapon pursuant to California Penal Code 12020.
- 51. Do not refuse a chemical test pursuant to §23612(a)(1)(A) VC
- 52. Pursuant to §13352 VC, your driving privilege is restricted for _____. If, and only if, allowed by the California Department of Motor Vehicles in writing, you may drive to and from work, during the course of your employment and to and from an alcohol treatment program.
- 53. Do not drive without a valid California Driver's License or proof of insurance in your possession.
- 54. Do not drive with any measurable amount of alcohol in your blood.
- 55. Comply with the conditions of probation in case _____.
- 56. Waive any confidentiality regarding your participation in ordered program(s) so that information regarding your performance and progress of any court ordered treatment or medical program(s) can be provided to the Court, your attorney, the District Attorney, and any treatment or healthcare providers. Sign any documents necessary to waive confidentiality; it being understood, however, that by signing your name below, you are authorizing your treatment provider or program staff to release information as may be requested by the Court or the Probation Department.
- 57. Unless participating in a job training program, working full time earning income, are incarcerated or in court ordered residential treatment, you are to perform a job search and submit proof of at least _____ job searches each week to your probation officer or to the Court as directed.

- 58. Prescription Medication: Obtain all prescription medications at one pharmacy as approved and documented by the probation officer.
- 58a. Prescription Medication: Obtain all prescription medications at one pharmacy as approved and documented by your probation officer, or the Court.
- 59. Only take prescription or over the counter medication as prescribed or instructed. Notify your probation officer of the medication(s) within one business working day. You may take the following products without notifying your probation officer, provided they are taken as directed on the bottle: aspirin, acetaminophen, ibuprofen.
- 59a. Only take prescription or other the counter medication as prescribed or instructed. Notify your treatment provider of the medication(s) you have been prescribed or are taking, within one business working day (if you are on formal probation). You may take the following products without notifying your treatment provider, provided they are taken as directed on the bottle: aspirin, acetaminophen, ibuprofen.
- 60. Obtain and use a daily planner. In this daily planner you are required to maintain an accurate record of all pending court reviews, probation appointments, treatment appointments, and other counseling sessions or classes which you are required to attend as a condition of probation. You are required to bring your daily planner to all probation appointments, court ordered counseling sessions and classes, and court reviews. You are required to update your daily planner on a daily basis.
- 61. You are required to bring a Court approved health care provider letter to all scheduled and unscheduled doctor, dental and healthcare provider appointments (including emergency room visits and walk-in clinics). If medications are prescribed, the letter shall be signed (including a contact telephone number and name of the provider) and returned to your probation officer or treatment provider within one business working day. Proposition 36 defendants must return the letter to their treatment provider, and if on formal probation to their Probation Officer as well, within one business day.
- 62. You must obtain any medications for “painkillers” (opioid medications) from one physician. That physician will be designated between you and your probation officer. The doctor must be notified and agree to be the only doctor who will ever prescribe opioid medications to you. Opioid medication prescriptions will never be refilled early, nor will they be refilled if you medication is lost or stolen or destroyed in an accident.
- 62a: You must obtain any medications for “painkillers” (opioid medications) from one physician. That physician will be designated between you and your probation officer or the Court. The doctor must be notified and agree to be the only doctor who will ever

prescribe opioid medications to you. Opioid medication prescriptions will never be refilled early, nor will they be refilled if your medication is lost or stolen or destroyed in an accident.

63. You are subject to the following curfew and are ordered to remain at your residence on New Year's Eve (December 31st), St. Patrick's Day (March 17th), and Halloween (October 31st) between the hours of 8:00 p.m. and 6:00 a.m. Exception: Community support functions and/or employment, only if previously approved by your probation officer.

64. Other: _____

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REQUEST FOR VICTIM SERVICES
CDCR 1707 (Rev. 04/08 Internet)

California Department of Corrections and Rehabilitation (CDCR)
Office of Victim and Survivor Rights and Services (OVSRS)
P.O. Box 942883, Sacramento, CA 94283-0001
Toll Free Number (877) 258-6877 Fax Number (916) 445-3737
http://www.cdcr.ca.gov/victim_services/index.html
DO NOT MAIL COMPLETED FORM TO A PRISON



Check one: New/Revised Request for Victim Services Change of address only (complete sections A, E, and F)

SECTION A. APPLICANT INFORMATION

Check one: Victim (direct victim of inmate) Witness Concerned Citizen
 Family member of victim (next of kin), indicate relationship: _____

Print Applicant Name: Circle Mr./Mrs./Ms. _____
(FIRST) (MIDDLE) (LAST)

Home Address: _____
(STREET) (CITY) (COUNTY) (STATE) (ZIP CODE)

Mailing Address (if Different): _____
(STREET or P.O. BOX) (CITY) (STATE) (ZIP CODE)

Telephone: () () () ()
(DAYTIME) (EVENING) (CELL) (EMAIL)

NOTE: It is your responsibility to keep the OVSRS informed of any changes to your personal information.

SECTION B. NOTIFICATION OF INMATE STATUS IN PRISON

I request the following notification service(s) about the status of the inmate in prison:

- Notification of release, escape, or death of an inmate
- Notification of inmate's criminal appeal (Note: Checking this box will allow us to share your information with the California Attorney General's Office.)

For victims/next of kin only:

- Notification of parole hearing (applies only to inmates sentenced to a prison term that includes a life sentence)
May we share your contact information with the district attorney's office where the trial was held? Yes No

SECTION C. CONDITIONS OF PAROLE FOR INMATE

NOTE: Requests for special conditions of parole are considered but not guaranteed.

I request the following conditions when the inmate is released on parole:

- Parolee not be allowed to contact me while he/she is on parole
- Parolee not be allowed to live in the same county that I live in

For victims/witnesses only:

- Parolee not be allowed to live within 35 miles of my home address (available only for specific types of crimes - see instructions)

NOTE: If you would like to provide additional information explaining your request, attach a separate sheet of paper.

SECTION D. RESTITUTION

- There is a restitution court order in the amount of \$_____ payable to (name): _____

NOTE: To be determined (TBD) orders must be finalized by the county before CDCR can collect restitution.

SECTION E. INMATE IDENTIFICATION

Please provide as much of the following information about the inmate as possible:

Inmate's Full Name (Print): _____ Date of Birth: ____/____/____
(FIRST) (MIDDLE) (LAST) MO DAY YEAR

CDC Number (Prison Number): _____ Date Sentenced to State Prison: ____/____/____
MO DAY YEAR

Court Case Number: _____ County of Commitment: _____

SECTION F. APPLICANT SIGNATURE

Signature of Applicant: _____ Date: _____