

CLINTON COUNTY MUNICIPAL COURT ADULT PROBATION DEPARTMENT

Conditions of Supervision

OFFENDER: _____ OFFENSE: _____

CASE #: _____ DOB: _____ SSN# _____

READ CAREFULLY BEFORE SIGNING:

You are in custody of the Court by reasons of your misdemeanor conviction. Your rights are restricted until your probation is terminated. As a probationer you can be arrested without a warrant by any officer, whenever there is reason to believe that you have violated the terms of your probation.

Pursuant to section 2952.021, you will be assessed a \$40.00 monthly fee as a probation services fee in addition to any fines and costs that may already be owed to the court.

CONDITIONS:

1. I will obey any/all federal, state, local laws and ordinances, including all orders, rules and regulations of the Clinton Co. Court System. If I have any contact with Law Enforcement or receive any new citations I will report it immediately to Probation.
2. I will always notify the Probation office if I change my address, my employment, my phone number by the next business day.
3. I will not leave the State of Ohio without written permission from the Clinton Co. Municipal Court Probation Department. I will notify/discuss travel to another county other than Clinton or the county of which I reside with my probation officer.
4. I will not enter the grounds of any correctional facility nor attempt to visit any prisoner, nor will I communicate with any prisoner in any manner without obtaining permission from the Probation Office.
5. I will follow all orders, verbal and written, given to me by Probation Officer or other authorized representatives of the Clinton Co Court System:
 - Turn cell phones off while in the Probation office during your reporting session
 - While waiting to be seen by the Probation Department, I will not have conversations with other probationers. I will sit quietly in the waiting room.
 - I understand I have a 9:00pm curfew unless otherwise notified by the Probation Department.
 - Appropriate clothing must be worn when reporting to the Probation Department. Females must be fully clothed, no tanks or short shorts. Males must wear appropriate shirts and no ribbed sleeveless tank shirts.
6. I will declare and certify in writing any weapons or firearms that are currently in my possession. I agree to not have them stored at the residence I am staying at. I will notify in writing my probation officer the manner of storage and safekeeping the location of which the weapons are being stored. 8/6/2018

7. I will not purchase, possess, use or have under my control any narcotic drug or other controlled substance or illegal drugs, to include alcoholic beverages and including any instruments, device, or other object used to administer drugs or to prepare them for administration, unless it is lawfully prescribed for me by a licensed physician. I agree to inform the Probation Department promptly of any such prescription and I agree to submit to drug testing, at my expense, if required and or requested by the Probation Department or other authorized representative of the Clinton County Court System.
8. I understand and agree that home visits or collateral visits will be conducted at random at any time during the term of my Supervision Probation.
9. I agree to search, without warrant, of my person, my personal belongings, cellular telephone, my motor vehicle or my place of residence by my Supervision Probation Department or other authorized representative of the Court at any time, any place.
10. I agree to not associate with persons having a criminal background and/or persons who may have gang affiliation or who could influence me to engage in criminal activity.
11. I agree to comply with all financial obligations, including but not limited to: Court fines/costs, child support, restitution, other agency fees and in-house education classes as ordered by any Court, the Probation Department and/or the Clinton Co. Court System. This is to include the costs of Electronic Monitoring House Arrest; (if applicable). I further understand that if my in-house classes and any other services offered by the Clinton Co. Municipal Court Probation Department are not paid in full, I will not be given credit for attending and/or successfully completing that particular group/service of which I participated.
12. I agree to follow all rules and regulations of treatment facilities or programs if any type in which I am placed or ordered to attend while under Supervised Probation and/or jurisdiction of the Court. To include; but not limited to: electronic monitoring, in-house classes, classes at outside agencies and community service.
13. I have read or had read to me the Conditions of my Supervision Probation. I fully understand these conditions and I agree to follow these conditions. I understand that a violation of any of these conditions may result in the revocation of my Probation which may result in additional imposed sanctions and/or return to Court for imposition of a suspended sentence. In addition, I understand that I must follow these conditions until otherwise notified by the Probation Department.

I understand that I will be reporting to the Clinton Co. Municipal Court Supervision Department. I understand that I am to report in a timely manner as scheduled. I fully understand the requirements of the Court and furthermore agree to participate in any programs thereby ordered and pay any/all fees associated with said programs. In addition, I understand that I am subject to random drug and/or alcohol testing at any time at my expense: *(\$25 lab fee for confirmation)*. **If at any point in time I'm caught tampering with or altering my urine sample in any way I understand that I may be charged with a Felony Tampering with Evidence.**

I further understand that my supervision shall include an assessment conducted by the Clinton Co. Municipal Court Probation Department to assess any criminogenic needs and/or risks on my behalf. This assessment will be used to assist in the determination of any programming and/or treatment plans felt necessary throughout the course of my supervision.

OFFENDER

DATE

SUPERVISION OFFICER

DATE