

STANDARD SEX OFFENDER RULES

OFFENDER NAME

DOC NUMBER

Notice: If you are on parole and sentenced for crimes committed on or after June 1, 1984, or have chosen to have the new Good Time Law apply to your case and you violate these rules, the highest possible parole violator sentence will be the total sentence less time already served in prison or jail in connection with the offense.

As established by Administrative Rule DOC 328.11, you have an opportunity for administrative review of certain types of decisions through the offender complaint process.

The following rules are in addition to any court-ordered conditions. Your probation, parole or extended supervision may be revoked if you do not comply with any of your court-ordered conditions or if you violate any of the following rules.

1. You shall have no contact with _____ nor any prior victims of your offenses nor their family members without prior agent approval. This includes face-to-face, telephone, mail, electronic, third party, or "drive by" contact.
2. You shall have no contact with anyone under the age of 18 without prior agent approval and unless accompanied by an adult sober chaperone approved by your agent. This includes face-to-face, telephone, mail, electronic, third party, or "drive by" contact.
3. You shall not establish, pursue, nor maintain any dating and/or romantic and/or sexual relationship without prior agent approval.
4. You shall fully cooperate with, participate in, and successfully complete all evaluations, counseling, and treatment as required by your agent, including but not limited to sex offender programming. "Successful completion" shall be determined by your agent and treatment provider(s). If sex offender treatment is required, you must attend and account for the details of the behavior committed in your conviction offense(s). Failure to admit the offense(s) or provide a detailed description will be considered a violation of your supervision and may result in disciplinary action including the recommendation for revocation of your supervision. Information revealed in treatment concerning your conviction offense(s) cannot be used against you in criminal proceedings.
5. You shall not reside nor "stay" overnight in any place other than a pre-approved residence without prior agent approval. "Overnight" is defined as the daily period of time between the hours of ____ p.m. and ____ a.m. unless redefined by your agent in advance.
6. You shall permit no person to reside nor stay in your designated residence between the hours of ____ p.m. and ____ a.m. without prior agent approval.
7. You shall not possess, consume, nor use any controlled substance nor possess any drug paraphernalia without a current prescription from a physician from whom you are receiving medical treatment. Verification must be provided to your agent as directed.
8. You shall not possess nor view any sexually explicit material-visual, auditory, nor computer-generated-without prior agent approval.
9. You shall seek, obtain, and maintain employment as directed by your agent. You shall obtain agent approval before accepting any offer of employment and prior to beginning any volunteer work.
10. You shall not purchase, own, nor manage any residential rental properties without prior agent approval.
11. You shall fully comply with all sex offender registry requirements as applicable and directed by your agent and/or required by statute. You shall immediately respond to all correspondence from the Sex Offender Registry Program.
12. You shall fully comply with Wisconsin Statute 165.76 requiring a biological specimen to be submitted to the State Crime Lab for DNA testing as applicable and as directed by your agent.
13. You shall pay all court ordered financial obligations and treatment co-payments as directed by your agent in accordance with your established payment plan.
14. You shall not purchase, possess, nor use a computer, software, hardware, nor modem without prior agent approval.

I have reviewed and explained these rules to the offender.		I have received a copy of these rules.	
AGENT SIGNATURE	AREA NUMBER	OFFENDER SIGNATURE	DATE SIGNED