

Conditions of Supervision

In consideration of having been granted supervision on _____

1. I will obey federal, state and local laws and ordinances, including those related to illegal drug use and registration with authorities. I will have no contact with the victim of my current offense(s).
2. I will follow all orders given to me by my supervising officer or other authorized representatives of the Court or the Department of Rehabilitation and Correction, including, but not limited to obtaining permission from my supervising officer before changing my residence and submitting to drug testing. I will report to my supervising officer in person by the next business day following my release from custody.
3. I will obtain a written travel permit from the Adult Parole Authority before leaving the State of Ohio.
4. I will not purchase, possess, own, use or have under my control, any firearms, ammunition, dangerous ordnance, devices used to immobilize or deadly weapons. I will obtain written permission prior to residing in a residence where these items are securely located.
5. I agree to fully participate in, and comply with, Special Conditions that will include programming/intervention to address very high, high, and moderate domains if indicated by a validated risk tool selected by DRC and any other special conditions imposed by the Parole Board, Court, or Interstate Compact:

NOTICE

1. I understand that if I am arrested outside the State of Ohio, my signature as witnessed at the end of the page will be deemed to be a waiver of extradition and that no other formalities will be required for an authorized agent of the State of Ohio to bring about my return.
2. Pursuant to section 2967.131, I will be subject to warrantless searches.
3. I will be required to pay supervision fees in the amount of \$20 per month unless waived by the Adult Parole Authority.

Monitored Time Conditions of Supervision

I understand that monitored time supervision has been imposed as a result of my conviction(s). While I am on monitored time supervision, I remain under the jurisdiction and control of the releasing authority and/or the Adult Parole Authority. My supervising officer has the power to arrest me if I violate any of the following conditions of supervision and to supervise me more closely or to impose other sanctions for violations:

1. I will obey federal, state, and local laws and ordinances including chapter 2923., Revised Code relating to firearms and conduct myself as a responsible law abiding person at all times. I understand that if I am on post release control and convicted of a new felony offense while under Post Release Control, the Court may impose an additional prison term consecutive to any prison sentence imposed for the new felony offense. I will report any arrest to the Adult Parole Authority no later than the next business day after my release from custody. Criminal record checks will be performed periodically by the Adult Parole Authority.
2. I will keep the Adult Parole Authority informed of my residence. I agree to notify the Adult Parole Authority immediately of any change of residence. I understand if I am a releasee and abscond supervision, I may be prosecuted for the crime of escape, under section 2921.34 of the revised code. I agree to follow all orders given to me by my supervising officer or other authorized representative of the Court or the Department of Rehabilitation and Correction.
3. I will obtain permission from my supervising officer prior to leaving the State of Ohio. I also must receive advance approval before I leave Ohio if I intend to relocate to another state. My failure to obtain permission from the other state through my supervising officer may result in my arrest and conviction of a felony in that state. I understand that if I am arrested outside the State of Ohio, my signature as witnessed as the end of the page will be deemed to be a waiver of extradition and that no other formalities will be required for an authorized agent of the State of Ohio to bring about my return. I understand that travel to any jurisdiction which requires felons to register with local authorities will also require me to comply with those laws.

Pursuant to 2951.02 and/or 296.131, Revised Code, authorized APA Officers may search, with or without a warrant, my person, place of residence, motor vehicle or other real or personal property that I occupy or have permission to use, if the officers have reasonable grounds to believe that I am not complying with the law or the conditions of supervision.

In the event that I wish to visit a member of my immediate family who is in prison, I must first obtain a travel permit from my supervising officer pursuant to policy 100-APA-07.

I understand I am subject to the above conditions until I am notified by the Adult Parole Authority.

I have read or had read to me, the foregoing conditions of supervision. I fully understand these conditions and I understand that violation of any term of this agreement may result in the imposition of more restrictive sanctions or revocation. Be advised, ORC 2967.16 (B) establishes the categories for final release from post release control as "favorable" or "unfavorable." If I receive an unfavorable final release from my post release control, this could result in an enhancement of any future felony sentence. By my signature I acknowledge that I have received a copy of these conditions of supervision.

September 2013