Parole Standard Conditions:

I understand that this grant of parole is contingent and conditional upon my full compliance with each and all of the following conditions, special conditions, terms and agreements as contained in this Parole Agreement. I agree to fully comply with each and every term and condition as specified in, and with any and all amendments made to, this Parole Agreement. [Parolee Initials]

I understand that the Board may rescind or revoke my parole for any violation of the terms and conditions of this agreement; or for any violation of institutional rules, institutional disciplinary violations, criminal conduct, or other failure to comply with the rules and regulations of the Utah Department of Corrections (DOC), including Adult Parole and Parole (AP&P) or the decisions and requirements of the Board. [Parolee Initials]

I understand that changes, amendments, additions or waivers to this Parole Agreement are only effective if approved by the Board. [Parolee Initials]

I understand and agree that in addition to allegations of parole violation, the Board may issue a warrant and conduct a parole revocation hearing, if, after the grant of parole, the Board determines I willfully provided any false or inaccurate information that was significant to the Boards parole determination or other decisions in my case; or if I have engaged in any criminal conduct of which the Board was unaware. [Parolee Initials]

| COMPLIANCE | I will comply with this Parole Agreement, all amendments to this Parole Agreement, and with the orders of the Board. I will comply with the requirements and requests of the Board, DOC, and AP&P. |
|--------------|---|
| REPORTING | On the day of my release from the institution of confinement, I will immediately report to my assigned AP&P agent. Thereafter, I will report as directed by AP&P throughout the term of my parole. |
| CONDUCT | I will obey all federal, state and municipal laws. I will obey all court orders to which I am subject. I will notify my parole agent within 48 hours of being arrested or questioned by a law enforcement officer. |
| COOPERATION | I will cooperate with the Board, DOC, and AP&P in furtherance of my supervision. |
| TRUTHFULNESS | I will be truthful in all my dealings with the Board, DOC, and AP&P. |
| ABSCONDING | I will not flee or abscond from parole, nor will I become a fugitive from parole. |

| RESIDENCE | I will establish and reside only at a residence of record, approved by DOC or AP&P. I will not change my residence without the prior approval of AP&P. |
|-----------------------|--|
| PAROLE VISITS | I will permit my parole agent to visit my residence or any other place where I am present. I will not avoid, interfere with or obstruct these visits. I will not own or possess vicious dogs, perimeter security doors, video surveillance, scanners or other radio frequency products, etc. without prior authorization from AP&P. |
| TRANSITIONAL SERVICES | If I do not have living arrangements and a residence approved by DOC or AP&P at least thirty (30) days prior to release, I agree to be released to, and comply with Transitional Services as directed by AP&P. I understand and agree that if bed space is unavailable in Transitional Services on the day of release, the Board may rescind and delay my parole without a hearing, until bed space is available, or until I have approved living arrangements. If my release is delayed more than thirty days, the Board will conduct a rescission hearing. |
| OUT OF STATE TRAVEL | I will not leave this state, or any other state to which I am released or transferred, even briefly, without prior written permission from my parole agent. |
| CURFEW | If directed by my parole agent, I will comply with a curfew from 9:00 p.m. to 6:00 a.m. for the first 90 days of my parole. My parole agent may grant exceptions for work, school, therapy or other circumstances. |
| SEARCH | I know that I am subject to, and I will allow at any time, the search or seizure of my person, property, personal effects, place of residence, or vehicle by AP&P or a law enforcement officer. I understand that such a search may be with or without a warrant and with or without cause. |
| WEAPONS | I will not own, possess, have under my control, in my custody or on the premises where I reside: any explosives, any firearms, or any dangerous weapons - including archery equipment or crossbows. |
| CENTER FEES | I will pay any AP&P or DOC fees incurred and owed by me for housing, meals or services provided to me at any DOC Community Corrections Center, Treatment Center or Parole Violator Center. |
| SUPERVISION FEES | Pursuant to State law [Utah Code Ann. §64-13-21(3)], I will pay supervision fees as determined by AP&P, unless those fees are waived by AP&P. |

| EMPLOYMENT | (a) I will seek, obtain and maintain regular, lawful, full-time (at least 30 hours per week) employment. (My parole agent may modify this requirement for schooling, training, treatment or other acceptable reasons.) (b) I will report all employment to my parole agent. (c) I will notify my parole agent of any change in my employment within 48 hours of the change. |
|-----------------------|---|
| ASSOCIATION | (a) I will not associate with any person who is involved in criminal activity. (b) I will not frequent places where controlled substances are illegally sold, used, distributed or administered. (c) I will not frequent places where criminal activity regularly occurs. (d) I will not associate with anyone who has been convicted of a felony, without approval from my parole agent. |
| CONTROLLED SUBSTANCES | I will not use, possess or ingest any controlled substance (AP&P may grant exceptions for valid prescriptions). I will submit to testing of my breath, body fluids or hair as directed by my parole agent. |
| ACTIVITIES | I will not enter into any agreement to act as an informant or agent of any law enforcement agency without the written approval of the Board. |
| OBLIGATIONS | I will pay all restitution obligations, fine or fees ordered by the Board or by a Court. I will pay all court ordered child support obligations. |

Probation Standard Condition

| VISITS | Permit visits to my place of residence, my place of employment or elsewhere by officers of Adult Probation and Parole for the purpose of ensuring compliance with the conditions of the Probation Agreement. I will not interfere with this requirement by having vicious dogs, perimeter security doors, refusing to open the door, etc. |
|-----------|--|
| REPORTING | Not abscond from probation supervision. A-Reporting: Report as directed by the Department of Corrections. B-Residence: Establish and reside at a residence of record and not change residence without first obtaining permission from the AP&P Officer. C-Leaving the State: Not leave the state of Utah, even briefly, or any other state to which I am released or transferred without prior written permission from the AP&P Officer. |
| CONDUCT | Obey all state, federal and municipal laws, and court orders. |

| WEAPONS | Not own, possess, have under my control, in my custody or on the premises where I reside: any explosives, firearms, archery equipment or crossbows, or any dangerous weapons. |
|-------------------|---|
| CHEMICAL ANALYSIS | Abstain from the illegal use, possession, control, delivery, production, manufacture or distribution of controlled substances (58-37-2 U.C.A.) and submit to tests of breath or body fluids to ensure compliance with the Probation Agreement. |
| SEARCHES | Permit officers of Adult Probation and Parole to search my person, residence, vehicle or any other property under my control without a warrant at any time, day or night upon reasonable suspicion to ensure compliance with the conditions of the Probation Agreement. |
| ASSOCIATION | Without approval from the AP&P Officer, I will not knowingly associate with any person who is involved in criminal activity or who has been convicted of a felony. |
| EMPLOYMENT | Unless otherwise authorized by the AP&P Officer; seek, obtain and maintain verifiable, lawful, full-time employment (32 hours per week minimum) as approved by the AP&P Officer. Notify the AP&P Officer of any change in my employment within 48 hours of the change. |
| TRUTHFULNESS | Be cooperative, compliant and truthful in all dealings with Adult Probation and Parole. If arrested, cited or questioned by a peace officer; notify the AP&P Officer within 48 hours. |
| SUPERVISION FEE | Agree to pay a supervision fee of \$30 per month unless granted a waiver by the Department of Corrections under the provisions of Utah Statute 64-13-21. |
| DNA | Comply with Utah Code Annotated Section 53-10-403-406 by submitting an adequate DNA specimen, and, unless determination is made that there is no ability to pay, pay the required fee specified by statute. |
| CURFEW | Comply with curfews as directed by the AP&P Officer. |
| CASE ACTION PLAN | Comply with Case Action Plan as directed by Adult Probation and Parole. |

Parole Special Conditions:

| Title | Agreement Type | Description |
|----------------------|------------------|--|
| ALCOHOL | Probation/Parole | Do not consume or possess alcoholic beverages or powder (alcoholic substances) or frequent places where alcohol is chief item of sale. |
| ANTI-ALCOHOL DRUG | Probation/Parole | Take an anti-alcohol drug if prescribed by a physician. |
| CCC MIO PROGRAM | Parole | Successfully complete the CCC MIO Program with outpatient follow-up. |
| CCC PROGRAM | Parole | Successfully complete a CCC Program. |
| CCC SEX OFFENDER PRG | Parole | Successfully complete a CCC Sex Offender Program. |
| CCC STABILIZATION | Parole | Enter CCC until stabilized. |
| CCC WORK PROGRAM | Parole | SUCCESSFULLY PARTICIPATE IN THE CCC WORK PROGRAM UNTIL [DATE] AND COMPLY WITH THE CCC WORK PROGRAM CONTRACT. |
| CLASS | Probation/Parole | Complete [WHAT CLASS] class(es) as directed. |
| COMMUNITY BOARD | Probation/Parole | Participate in and be monitored by the Community Review/Accountability Board, and comply with their recommendations as approved by the Court or Board of Pardons and Parole. |
| COMMUNITY SERVICE | Probation/Parole | Complete [#] hours of community service as directed. |
| CURFEW | Probation/Parole | Abide by a curfew as directed. |
| DORA | Probation/Parole | Complete substance abuse treatment and aftercare through |

DORA Program, as directed.

| DRUG BOARD | Parole | Successfully complete the Drug Board Program. |
|----------------------|------------------|--|
| EDUCATION/VOCATIONAL | Probation/Parole | Successfully complete educational and/or vocational training or other training as directed. |
| EXTRADITION | Probation/Parole | Pay extradition costs of \$[AMOUNT]. |
| FINANCIAL COUNSELING | Probation/Parole | Attend and complete a financial counseling program as directed. |
| FINANCIAL RECORDS | Probation/Parole | Make all financial records available to AP&P upon request. |
| GED/DIPLOMA | Probation/Parole | Obtain a GED or high school diploma. |
| GPS MONITORING | Probation/Parole | Successfully complete GPS Monitoring program as directed. |
| HALFWAY BACK PROGRAM | Parole | Successfully complete the Halfway Back Program. |
| HALFWAY OUT PROGRAM | Parole | Successfully complete the Halfway Out Program at [LOCATION]. |
| HOME CONFINE W/ EM | Probation/Parole | Successfully complete Home Confinement with Electronic Monitoring for [HOW LONG]. |
| HOME CONFINE W/O EM | Probation/Parole | Successfully complete Home Confinement for [HOW LONG]. |
| INTENSIVE OUTPT SA | Probation/Parole | Successfully complete Intensive Outpatient Substance Abuse treatment, as directed. |
| INTERLOCK IGNITION | Probation/Parole | Not drive a vehicle without an interlocking ignition device installed. |
| INTERSTATE COMPACT | Probation/Parole | Execute and adhere to the terms of the Interstate Compact Waiver and Agreement if probation or parole is served outside the state |

| | | of Utah. Abide by all terms and conditions ordered by the state of [COMPACT STATE]. |
|----------------------|------------------|---|
| JAIL | Probation/Parole | Serve [HOW LONG] in the [NAME OF JAIL] commencing [DATE]. |
| LIFE SKILLS | Probation/Parole | Complete Life Skills classes as directed. |
| MENTAL HEALTH EVAL | Probation/Parole | Complete a Mental Health Evaluation and recommended treatment. |
| MENTAL HEALTH RX | Probation/Parole | Successfully complete Mental Health Therapy. |
| NO CHECKING | Probation/Parole | Have no checking, draft or credit accounts. |
| NO CONTACT | Probation/Parole | Have no contact with [NAME]. |
| NO CONTACT/CHILDREN | Probation/Parole | Have no verbal, written or direct contact with the victim(s) or any children under the age of [AGE] until approved by a therapist and Adult Probation and Parole. When approved, all contact will be supervised by an adult who knows about the offense and is approved by Adult Probation and Parole and the therapist. |
| NO FIDUCIARY EMPLOYM | Probation/Parole | Not be employed in a fiduciary position. |
| NO SELF-EMPLOYMENT | Probation/Parole | Not be self-employed. |
| NOT DRIVE W/O LICENS | Probation/Parole | Not drive without a valid driver license. |
| NOT REMAIN IN USA | Probation/Parole | Not remain in or enter the United States illegally. |
| NOT RESIDE RESERVATN | Probation/Parole | Not reside on a Native American Indian Reservation without prior approval of Adult Probation and Parole. |
| NOTIFY AP&P MEDS | Probation/Parole | Notify Adult Probation and Parole of all prescriptions. |

| NOTIFY MD/DDS DRUGS | Probation/Parole | Notify physician and/or dentist of drug abuse history. |
|----------------------|------------------|--|
| OFFENDER ID CARD | Probation/Parole | Carry the Adult Probation and Parole offender ID card on my person at all times, and present it to any law enforcement officer when contacted. |
| OTHER | Probation/Parole | [MODIFY CONDITION TITLE AND FILL IN ADDITIONAL SPECIAL CONDITION.] |
| OUTPT SO TREATMENT | Probation/Parole | Successfully complete Outpatient Sex Offender Therapy as directed. |
| PAY FINE | Parole | Pay fine of \$[AMOUNT] in reference to Case #[CASE NUMBER]. |
| PAY RESTITUTION | Parole | Pay restitution of \$[AMOUNT] in reference to Case #[CASE NUMBER]. |
| PRESCRIBED MEDS | Probation/Parole | Take medications if prescribed. |
| PROGRAM/TREATMENT | Probation/Parole | Enter, participate in, complete [PROGRAM NAME] program, counseling or treatment as directed. |
| RECOUPMENT | Probation/Parole | Pay (LDA) recoupment fee of \$[AMOUNT]. |
| REMIT (NOT PAY) FINE | Parole | Remit (not pay) fine of \$[AMOUNT] in reference to case #[CASE NUMBER]. |
| REPORT UPON RETURN | Parole | Report to Utah Adult Probation and Parole within [HOW MANY] hours of return to the United States. |
| RESIDENTIAL TX | Probation/Parole | Successfully complete the [PROGRAM NAME] Residential Treatment program as directed. |
| SECURITY FEE | Probation/Parole | Pay \$[AMOUNT] Court Security Fee in reference to Case #[CASE NUMBER]. |

| SERVICE FEES | Probation/Parole | Pay service fees of \$[]. |
|----------------------|------------------|--|
| SHOCK PROGRAM | Parole | Successfully complete the SHOCK Program. |
| SUBSTANCE ABUSE EVAL | Probation/Parole | Complete a Substance Abuse Evaluation and recommended treatment. |
| SUBSTANCE ABUSE RX | Probation/Parole | Successfully complete Substance Abuse Therapy. |
| SYNTH CANNABINOIDS | Probation/Parole | Do not consume or possess synthetic cannabinoids. |
| ТЕАМ | Probation/Parole | Successfully complete the TEAM Program as directed. |
| TRANSITION SERVICES | Parole | Cooperate with transitional services as directed. |
| TX/RESOURCE CENTER | Probation/Parole | Complete all programming as directed at the [NAME OF TRC] Treatment and Resource Center. |
| VOA DETOX PROGRAM | Probation/Parole | Successfully complete the Volunteers of America Detoxification Program as directed. |
| WRITING ASSIGNMENT | Probation/Parole | Complete any writing assignment ordered by the court or as directed by AP&P. |

Probation Special Conditions:

| Title | Agreement Type | Description |
|-------------------|------------------|---|
| AA/NA MEETINGS | Probation | Attend [HOW MANY] AA/NA Meetings per [HOW OFTEN] as directed by AP&P. |
| ALCOHOL | Probation/Parole | Do not consume or possess alcoholic beverages or powder (alcoholic substances) or frequent places where alcohol is chief item of sale. |
| ALCOHOL ED FUND | Probation | Pay \$150 to the Alcohol Education Fund as directed. |
| ALCOHOL TESTING | Probation | Submit to testing for the use of alcohol. |
| ANTI-ALCOHOL DRUG | Probation/Parole | Take an anti-alcohol drug if prescribed by a physician. |
| APOLOGY LETTER | Probation | Submit a letter of apology to the victim as approved by the therapist and AP&P. |
| BUMPER STICKER | Probation | Display an anti-drug bumper sticker on vehicle or in the front window of residence as directed by AP&P. |
| C.A.T.S. PROGRAM | Probation | Enter into and successfully complete the C.A.T.S. Program and aftercare as directed by the Court. |
| CCC PROGRAM | Probation | Enter and complete any programming as directed in the [NAME OF CCC] Community Corrections Center. |
| CHILD SUPPORT | Probation | Pay and remain current with court-ordered child support payments. |
| CLASS | Probation/Parole | Complete [WHAT CLASS] class(es) as directed. |

| COMMUNITY BOARD | Probation/Parole | Participate in and be monitored by the Community Review/Accountability Board, and comply with their recommendations as approved by the Court or Board of Pardons and Parole. |
|----------------------|------------------|--|
| COMMUNITY SERVICE | Probation/Parole | Complete [#] hours of community service as directed. |
| CS IN LIEU OF FINE | Probation | May satisfy \$[AMOUNT] of the fine by completing [#] hours of community service. |
| CURFEW | Probation/Parole | Abide by a curfew as directed. |
| CURFEW TIMES | Probation | Abide by a curfew from [TIME] to [TIME] as directed. |
| DORA | Probation/Parole | Complete substance abuse treatment and aftercare through DORA Program, as directed. |
| DRUG COURT | Probation | Successfully complete the Drug Court Program as directed. |
| DRUG DISCLOSURE | Probation | Be honest in a full disclosure to law enforcement of all drug activity, associations and involvement as directed by AP&P. |
| EDUCATION/VOCATIONAL | Probation/Parole | Successfully complete educational and/or vocational training or other training as directed. |
| EXTRADITION | Probation/Parole | Pay extradition costs of \$[AMOUNT]. |
| FINANCIAL COUNSELING | Probation/Parole | Attend and complete a financial counseling program as directed. |
| FINANCIAL RECORDS | Probation/Parole | Make all financial records available to AP&P upon request. |
| FINES/FEES | Probation | Pay fines and fees in the amount of \$[AMOUNT], in reference to case #[CASE NUMBER], at a rate of \$[AMOUNT] per month beginning [DATE] or as directed |

| by | AF | P&F | ۶. |
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|----|----|-----|----|

| GED/DIPLOMA | Probation/Parole | Obtain a GED or high school diploma. |
|---------------------|------------------|---|
| GPS MONITORING | Probation/Parole | Successfully complete GPS Monitoring program as directed. |
| HOME CONFINE W/ EM | Probation/Parole | Successfully complete Home Confinement with Electronic Monitoring for [HOW LONG]. |
| HOME CONFINE W/O EM | Probation/Parole | Successfully complete Home Confinement for [HOW LONG]. |
| INTENSIVE OUTPT SA | Probation/Parole | Successfully complete Intensive Outpatient Substance Abuse treatment, as directed. |
| INTERLOCK IGNITION | Probation/Parole | Not drive a vehicle without an interlocking ignition device installed. |
| INTERSTATE COMPACT | Probation/Parole | Execute and adhere to the terms of the Interstate Compact Waiver and Agreement if probation or parole is served outside the state of Utah. Abide by all terms and conditions ordered by the state of [COMPACT STATE]. |
| JAIL | Probation/Parole | Serve [HOW LONG] in the [NAME OF JAIL] commencing [DATE]. |
| LIFE SKILLS | Probation/Parole | Complete Life Skills classes as directed. |
| MENTAL HEALTH COURT | Probation | Successfully complete the Mental Health Court program as directed. |
| MENTAL HEALTH EVAL | Probation/Parole | Complete a Mental Health Evaluation and recommended treatment. |
| MENTAL HEALTH RX | Probation/Parole | Successfully complete Mental Health Therapy. |
| NO CHECKING | Probation/Parole | Have no checking, draft or credit accounts. |
| NO CONTACT | Probation/Parole | Have no contact with [NAME]. |

| NO CONTACT/CHILDREN | Probation/Parole | Have no verbal, written or direct contact with the victim(s) or any children under the age of [AGE] until approved by a therapist and Adult Probation and Parole. When approved, all contact will be supervised by an adult who knows about the offense and is approved by Adult Probation and Parole and the therapist. |
|----------------------|------------------|---|
| NO FIDUCIARY EMPLOYM | Probation/Parole | Not be employed in a fiduciary position. |
| NO SELF-EMPLOYMENT | Probation/Parole | Not be self-employed. |
| NOT DRIVE W/O LICENS | Probation/Parole | Not drive without a valid driver license. |
| NOT REMAIN IN USA | Probation/Parole | Not remain in or enter the United States illegally. |
| NOT RESIDE RESERVATN | Probation/Parole | Not reside on a Native American Indian Reservation without prior approval of Adult Probation and Parole. |
| NOTIFY AP&P MEDS | Probation/Parole | Notify Adult Probation and Parole of all prescriptions. |
| NOTIFY MD/DDS DRUGS | Probation/Parole | Notify physician and/or dentist of drug abuse history. |
| OFFENDER ID CARD | Probation/Parole | Carry the Adult Probation and Parole offender ID card on my person at all times, and present it to any law enforcement officer when contacted. |
| OTHER | Probation/Parole | [MODIFY CONDITION TITLE AND FILL IN ADDITIONAL SPECIAL CONDITION.] |
| OUTPT SO TREATMENT | Probation/Parole | Successfully complete Outpatient Sex Offender Therapy as directed. |
| PRESCRIBED MEDS | Probation/Parole | Take medications if prescribed. |
| PROGRAM/TREATMENT | Probation/Parole | Enter, participate in, complete |

| | | [PROGRAM NAME] program, counseling or treatment as directed. |
|----------------------|------------------|--|
| RECOUPMENT | Probation/Parole | Pay (LDA) recoupment fee of \$[AMOUNT]. |
| RELAPSE WORKBOOK | Probation | Complete Relapse Workbook as directed by Adult Probation and Parole. |
| RESIDENTIAL TX | Probation/Parole | Successfully complete the [PROGRAM NAME] Residential Treatment program as directed. |
| RESTITUTION | Probation | Pay restitution in the amount of \$[AMOUNT], in reference to case #[CASE NUMBER], at a rate of \$[AMOUNT] per month or as directed by Adult Probation and Parole. |
| SECURITY FEE | Probation/Parole | Pay \$[AMOUNT] Court Security Fee in reference to Case #[CASE NUMBER]. |
| SERVICE FEES | Probation/Parole | Pay service fees of \$[]. |
| SO-CHILDREN CONGREGT | Probation | Not enter places or events where children congregate including, but not limited to: schools, playgrounds, parks, arcades, parties, family functions, holiday festivities or any other place or function where children are present or reasonably expected to be present without prior written approval from Adult Probation and Parole or without the supervision of a responsible adult previously approved by Adult Probation and Parole. |
| SO-CHILDREN UNDER 18 | Probation | Have no contact or association with children under the age of 18 without prior written approval of |
| | | Adult Probation and Parole. |

| | | any time during the term of probation. |
|----------------------|-----------|---|
| SO-CURFEW | Probation | Enter into and successfully complete established progressive curfews or electronic monitoring where available, when required by Adult Probation and Parole. |
| SO-EMPLOYMENT | Probation | Employment must be approved by Adult Probation and Parole. |
| SO-ENTERTAIN/LURE | Probation | Not have in my possession or under my control any items or materials either designed for, or used to, entertain, lure or attract the attention of children under the age of 18 without prior written approval from Adult Probation and Parole. |
| SO-EXPLOIT MATERIAL | Probation | Not have in my possession or under my control any material that describes or depicts human nudity, the exploitation of children, consensual sex acts, non- consensual sex acts, sexual acts involving force or violence including, but not limited to: computer programs, computer links, photographs, drawings, video tapes, audio tapes, magazines, books, literature, writings, etc. without prior approval from Adult Probation and Parole. |
| SO-INTERNET | Probation | Not have any internet access during the term of probation. |
| SO-INTERSTATE COMPCT | Probation | Execute and adhere to the terms of the Interstate Compact Waiver and Agreement if probation or parole is served outside the state of Utah. |
| SO-NOT DATE | Probation | Not date persons with children residing at home under the age of 18 without prior written approval |

of Adult Probation and Parole. SO-PERSONAL COMPUTER Probation Not use any computer not personally owned by this defendant. SO-POLYGRAPH Probation Submit to random polygraph examinations. SO-RESIDENCE Probation Residence and residence changes must be approved by Adult Probation and Parole. SO-STIMULUS MATERIAL Probation Not have in my possession or under my control any material that acts as a sexual stimulus for my particular deviancy(s) including, but not limited to: computer programs, computer links, photographs, drawings, video tap s, audio tapes, magazines, books, literature, writings, etc. without the written approval from Adult Probation and Parole. SO-THERAPY Probation Enter into, participate in and successfully complete sex offender therapy as determined by the treating facility, therapists and the Utah Department of Corrections. SO-VICTIM CONTACT Probation Have no direct or indirect contact with victim(s) or victim's family without prior approval from Adult Probation and Parole. SUBSTANCE ABUSE EVAL Probation/Parole Complete a Substance Abuse Evaluation and recommended treatment. SUBSTANCE ABUSE RX Probation/Parole Successfully complete Substance Abuse Therapy. SYNTH CANNABINOIDS Probation/Parole Do not consume or possess synthetic cannabinoids. TEAM Probation/Parole Successfully complete the TEAM Program as directed.

| TX/RESOURCE CENTER | Probation/Parole | Complete all programming as directed at the [NAME OF TRC] Treatment and Resource Center. |
|--------------------|------------------|--|
| VOA DETOX PROGRAM | Probation/Parole | Successfully complete the Volunteers of America Detoxification Program as directed. |
| WRITING ASSIGNMENT | Probation/Parole | Complete any writing assignment ordered by the court or as directed by AP&P. |

Probation & Parole Group Conditions:

ELECTRONIC MONITOR PROGRAM

a. CURFEW Be at place of residence between the hours of the designated curfew times every day of the week unless otherwise approved by the supervising AP&P Officer, and comply with the confinement schedule and the confinement area.

b. DISCONNECT PHONE Not disconnect the telephone line, power cord, or tamper with the transmitter in any way without prior authorization from the supervising AP&P Officer or the Electronic Monitoring Staff.

c. HMU MOVE Not move the Home Monitoring Unit (HMU) without prior authorization from the supervising AP&P Officer or the Electronic Monitoring Staff.

d. HMU ABUSE Not physically abuse the electronic monitoring equipment; i.e. Home Monitoring Unit (HMU), transmitter or band. If the HMU, transmitter or band is lost, damaged or tampered with; understand responsibility for the replacement and/or repair cost of the equipment.

e. PROVIDE PHONE LINE Understand the Electronic Monitoring Program requires provision, at personal expense, of a phone line for the use of the HMU. Understand the HMU may cause some disturbance with existing phone line.

f. PHONE SERVICES Understand the phone line may not have Call Waiting, Call Forwarding, Voice Mail or Caller ID; nor an answering machine, cordless phone, fax machine, computer modem or cellular phone used on the phone line. Bring copies of phone bill to the supervising agent on a monthly basis for verification if needed.

SEX OFFENDER A PROGRAM

a. THERAPY Enter into, participate in and successfully complete sex offender therapy as determined by the treating facility, therapists and the Utah Department of Corrections.

b. CURFEW Enter into and successfully complete established progressive curfews or electronic monitoring where available, when required by Adult Probation and Parole.

c. VICTIM CONTACT Have no direct or indirect contact with victim(s) or victim's family without prior approval from Adult Probation and Parole.

d. CHILDREN UNDER 18 Have no contact or association with children under the age of 18 without prior written approval of Adult Probation and Parole.

e. NOT DATE Not date persons with children residing at home under the age of 18 without prior written approval of Adult Probation and Parole.

f. CHILDREN CONGREGATE Not enter places or events where children congregate including, but not limited to: schools, playgrounds, parks, arcades, parties, family functions, holiday festivities or any other place or function where children are present or reasonably expected to be present without prior written approval from Adult Probation and Parole or without the supervision of a responsible adult previously approved by Adult Probation and Parole.

g. SEX STIMULUS MATERIA Not have in my possession or under my control any material that acts as a sexual stimulus for my particular deviancy(s) including, but not limited to: computer programs, computer links, photographs, drawings, video tapes, audio tapes, magazines, books, literature, writings, etc. without the written approval from Adult Probation and Parole.

h. EXPLOIT MATERIAL Not have in my possession or under my control any material that describes or depicts human nudity, the exploitation of children, consensual sex acts, non-consensual sex acts, sexual acts involving force or violence including, but not limited to: computer programs, computer links, photographs, drawings, video tapes, audio tapes, magazines, books, literature, writings, etc. without prior approval from Adult Probation and Parole.

i. ENTERTAIN/LURE Not have in my possession or under my control any items or materials either designed for, or used to, entertain, lure or attract the attention of children under the age of 18 without prior written approval from Adult Probation and Parole.

j. POLYGRAPH Submit to random polygraph examinations.

k. EMPLOYMENT Employment must be approved by Adult Probation and Parole.

I. RESIDENCE Residence and residence changes must be approved by Adult Probation and Parole. m. INTERSTATE COMPACT Execute and adhere to the terms of the Interstate Compact Waiver and Agreement if probation or parole is served outside the state of Utah.

n. REGISTRATION/DNA Comply with requirements of the Utah Sex Offender Registration and DNA specimen requirements.

SEX OFFENDER B PROGRAM

a. THERAPY Enter into, participate in and successfully complete sex offender therapy as determined by the treating facility, therapists and the Utah Department of Corrections.

b. CURFEW Enter into and successfully complete established progressive curfews or electronic monitoring where available when required by Adult Probation and Parole.

c. VICTIM CONTACT Have no direct or indirect contact with the victim(s) or victim's family without prior written approval from Adult Probation and Parole.

d. SEX STIMULUS MATERIA Not have in my possession or under my control any material that acts as a sexual stimulus for my particular deviancy(s) including, but not limited to: computer programs, computer links, photographs, drawings, video tapes, audio tapes, magazines, books, literature, writings, etc. without prior written approval from Adult Probation and Parole.

e. EXPLOIT MATERIAL Not have in my possession or under my control any material that describes or depicts human nudity, the exploitation of children, consensual sex acts, non-consensual sex acts, sexual acts involving force or violence including, but not limited to: computer programs, computer links, photographs, drawings, video tapes, audio tapes, magazines, books, literature, writings, etc. without prior

written approval from Adult Probation and Parole.

f. B/POLYGRAPH Submit to random polygraph examinations.

g. EMPLOYMENT Employment must be approved by Adult Probation and Parole.

h. RESIDENCE Residence and residence changes must be approved by Adult Probation and Parole.

i. INTERSTATE COMPACT Execute and adhere to the terms of the Interstate Compact Waiver and Agreement if probation or parole is served outside of the state of Utah.

j. REGISTRATION/DNA Comply with the requirements of Utah Sex Offender Registration and DNA specimen requirements.

SEX OFFENDER C PROGRAM

a. THERAPY Submit to an evaluation and successfully complete Sex Offender Therapy as determined by the treating facility, therapists and the Utah Department of Corrections.

b. CURFEW Enter into and successfully complete established progressive curfews or electronic monitoring, where available, when required by Adult Probation and Parole.

c. NO CONTACT W/VICTIM Have no direct or indirect contact with the victim(s) or victim's family without prior written approval from Adult Probation and Parole.

d. RELATIONSHIP Do not date or establish a relationship with anyone under the age of 18 without prior written approval of Adult Probation and Parole. This does not preclude contact with children under age 18 who are related to the offender.

e. REGISTRATION Comply with requirements of state sex offender registration, if applicable.

f. DNA Comply with state DNA specimen requirements.

g. POLYGRAPH Submit to random polygraph examinations.

GANG PROGRAM

a. GANG MEMBERS Not associate with any known member.

b. INSIGNIAS/EMBLEMS Not wear, display, use or possess any insignias, emblems or clothing associated with a specific gang(s) including, but not limited to: belt buckles, jewelry, caps/hats, jackets, shoes/shoe laces, scarves/bandanas, shirts inscribed "In Memory Of" a deceased or incarcerated gang member, or other articles of clothing modified to represent a particular gang(s).

c. SIGNS/GESTURES Not display any gang signs, gestures or any posturing associated with any specific gang(s).

d. DOCUMENTS/DATA/PHOTO Not have in my possession any written materials, documents, computer data, photographs which give evidence of gang involvement or activity such as: (1)

membership or enemy lists, (2) articles which contain or have upon them gang-associated graffiti, drawings or lettering, (3) photographs or newspaper clippings of gang members, gang crimes or activities including obituaries, (4) photographs of myself in gang clothing, demonstrating hand signs or holding weapons.

e. PAINT/PENS Not have in my possession or under my control spray paint, spray can tips, large marking pens or other items commonly used to create graffiti, or tagger magazines.

f. FREQUENT GANG PLACES Not frequent places where known gang members congregate.

g. NOT AT COURT Not appear in court or at a court building where other known gang member(s) are present and/or where a judicial proceeding involving a gang member is in progress, unless a party to proceedings in that court or subpoenaedto appear.

h. FREQUENT SCHOOLS Not visit or frequent any school ground unless I am a student registered at that school and present during appropriate class hours.

i. STOLEN VEHICLE Not be an occupant in any stolen vehicle, or vehicle I should have known was stolen.

j. FIREARM/AMMUITION Not have in my possession, in my custody, under my control, in a vehicle in which I am a passenger, or on the premises where I reside: (1) any firearm or replica thereof, (2) ammunition, or (3) dangerous weapon (any item which, in the manner of its use or intended use, is capable of causing death or serious bodily injury), and further, I shall not associate with, or be in the company of, any individual who has firearms or dangerous weapons in their possession or under their control.

k. FIREARMS USED Not be involved in activities in which, or frequent places at which, firearms or dangerous weapons are used, legally or otherwise including, but not limited to, hunting or target shooting.
I. DRIVER LICENSE/ID Obtain and carry on my person at all times a valid Utah Driver License, Utah Identification Card or other approved photo identification.

m. LAW ENFORCE CONTACT If/when contacted by law enforcement, I shall provide my true name, place of residence (street address, not PO Box) and date of birth, and inform the officer(s) of my probation or parole status; I shall report such contact to my supervising agent within 48 hours, including the date and the nature of the contact, the law enforcement agency and any potential charges. n. VICIOUS DOGS Not own, possess, maintain or raise vicious dogs, nor keep them on the premises where I reside.