



Department of Corrections and Rehabilitation

**NOTICE OF CHANGE TO
REGULATIONS**

Section(s): 3620, 3621, and 3622

Number:

16-12

Publication Date:

October 14, 2016

Effective Date:

To Be Announced

INSTITUTION POSTING AND CERTIFICATION REQUIRED

This Notice announces the proposed amendments to Sections 3620, 3621, and 3622 of the California Code of Regulations (CCR), Title 15, Crime Prevention and Corrections, to incorporate into the CCR, provisions concerning Urinalysis Testing.

IMPLEMENTATION:

To Be Announced

PUBLIC COMMENT PERIOD

Any person may submit written comments about the proposed regulations to the California Department of Corrections and Rehabilitation, Regulation and Policy Management Branch (RPMB), P.O. Box 942883, Sacramento, CA 94283-0001, by fax to (916) 324-6075, or by e-mail to RPMB@cdcr.ca.gov. All written comments must be received by the close of the public comment period **December 9, 2016**.

PUBLIC HEARING INFORMATION

A public hearing regarding these proposed regulations will be held **December 9, 2016, from 10:00 a.m. to 11:00 a.m. in the Kern/Colorado Room, located at 1515 S Street, Sacramento, CA 95811**. The purpose of the hearing is to receive oral comments about this action. It is not a forum to debate the proposed regulations. No decision regarding the permanent adoption of these regulations will be rendered at this hearing. Written or facsimile comments submitted during the prescribed comment period are given the same significance and weight as oral comments presented at the hearing. This hearing site is accessible to the mobility impaired.

POSTING

This Notice shall be posted immediately upon receipt at locations accessible to inmates, parolees, and employees in each Department facility and field office not later than five calendar days after receipt. Also, facilities shall make this Notice available for review by inmates in segregated housing who do not have access to the posted copies, and shall distribute it to inmate law libraries and advisory councils. CDCR Form 621-A (Rev. 09/14), Certification of Posting, shall be returned to the RPMB electronically, by fax, or by mail. See Department Operations Manual Sections 12010.12.1 and 12010.12.2 for posting and certification of posting procedures.

CONTACT PERSON

Inquiries regarding the subject matter of these regulations may be directed to Roger Gold, Parole Agent II, Division of Adult Parole Operations, at (916) 324-3253. Inquiries regarding this Notice should be directed to Timothy M. Lockwood, Chief, RPMB, California Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001, by telephone (916) 445-2269 or e-mail RPMB@cdcr.ca.gov.

Original signed by:

RALPH M. DIAZ
Undersecretary, Operations
California Department of Corrections and Rehabilitation

Attachments

NOTICE OF PROPOSED REGULATORY ACTION

California Code of Regulations Title 15, Crime Prevention and Corrections Department of Corrections and Rehabilitation

NOTICE IS HEREBY GIVEN that the Secretary of the California Department of Corrections and Rehabilitation (CDCR), pursuant to the authority granted by Government Code Section 12838.5 and Penal Code (PC) Section 5055, and the rulemaking authority granted by PC Section 5058, proposes to revise Sections 3620, 3621, and 3622 of the California Code of Regulations (CCR), Title 15, Division 3, Urinalysis Testing for parolees.

PUBLIC HEARING:

Date and Time: **December 9, 2016 – 10:00 a.m. to 11:00 a.m.**
Place: Department of Corrections and Rehabilitation
Kern/Colorado Room
1515 S Street – North Building
Sacramento, CA 95811
Purpose: To receive comments about this action.

PUBLIC COMMENT PERIOD:

The public comment period will close **December 9, 2016 at 5:00 p.m.** Any person may submit public comments in writing (by mail, by fax, or by e-mail) regarding the proposed changes. To be considered by the Department, comments must be submitted to the CDCR, Regulation and Policy Management Branch, P.O. Box 942883, Sacramento, CA 94283-0001; by fax at (916) 324-6075; or by e-mail at RPMB@cdcr.ca.gov before the close of the comment period.

CONTACT PERSON:

Please direct any inquiries regarding this action to:

**Timothy M. Lockwood, Chief
Regulation and Policy Management Branch
Department of Corrections and Rehabilitation
P.O. Box 942883, Sacramento, CA 94283-0001
Telephone (916) 445-2269**

In the event the contact person is unavailable, inquiries should be directed to the following back-up person:

**Sherri Garcia
Regulation and Policy Management Branch
Telephone (916) 445-2266**

Questions regarding the substance of the proposed regulatory action should be directed to:

**Roger Gold
Division of Adult Parole Operations
(916) 324-3253**

INFORMATIVE DIGEST/POLICY STATEMENT OVERVIEW:

PC Section 5000 provides that commencing July 1, 2005, any reference to the Department of Corrections in this or any code, refers to the CDCR, Division of Adult Operations.

PC Section 5050 provides that commencing July 1, 2005, any reference to the Director of Corrections, in this or any other code, refers to the Secretary of the CDCR. As of that date, the office of the Director of Corrections is abolished.

PC Section 5054 provides that commencing July 1, 2005, the supervision, management, and control of the state prisons, and the responsibility for the care, custody, treatment, training, discipline, and employment of persons confined therein are vested in the Secretary of the CDCR.

PC Section 5058 authorizes the Director to prescribe and amend regulations for the administration of prisons.

This action:

- Updates the revision date in regulation text for the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log.
- Removes the requirement of having the parolee(s) sign the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log.
- Add the requirement for staff to submit the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log to the Unit Supervisor with the caseload roster by the last working day of the month, documenting all urinalysis testing tests taken in the month.
- Updates the revision date in regulation text for the CDCR 1515-Addendum (Rev. 11/15), Special Conditions of Parole.

FORMS INCORPORATED BY REFERENCE:

CDCR 1515-Addendum (Rev. 11/15), Special Conditions of Parole
CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log

SPECIFIC BENEFITS ANTICIPATED BY THE PROPOSED REGULATIONS:

The proposed regulatory action may protect public health and safety and worker safety, and will benefit CDCR staff and parolees by providing direction on urinalysis sample collection. Urinalysis test kits include collection bottles with litmus paper that can instantly test the urine. This reduces the number of urine samples requiring confirmation by a laboratory. These protocols also include the use of the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log.

The Department has determined that staff does not need to obtain the parolee's signature on the CDCR 2249. Removing the requirement to obtain the parolee's signature improve efficiency.

EVALUATION OF CONSISTENCY / COMPATIBILITY WITH EXISTING REGULATIONS:

The Department has researched existing regulations and has determined that these proposed regulations are consistent and compatible with existing state laws and regulations. After a review for any regulations that would relate to or affect this area, CDCR had concluded that these are the only regulations that concern CDCR inmates for capacity determination and selection of a surrogate decision maker.

LOCAL MANDATES:

The proposed regulatory action imposes no mandates on local agencies or school districts, or a mandate which

requires reimbursement pursuant to Government Code Sections 17500 – 17630.

FISCAL IMPACT STATEMENT:

- Cost to any local agency or school district that is required to be reimbursed: *None*
- Cost or savings to any state agency: *None*
- Other nondiscretionary cost or savings imposed on local agencies: *None*
- Cost or savings in federal funding to the state: *None*

EFFECT ON HOUSING COSTS:

The Department has made an initial determination that the proposed action will have no significant effect on housing costs.

SIGNIFICANT ADVERSE ECONOMIC IMPACT ON BUSINESS

The Department has made an initial determination that the proposed regulatory action will not have a significant adverse impact on business in the State of California because those businesses are not affected by the internal management of offenders.

RESULTS OF ECONOMIC IMPACT ASSESSMENT:

The Department has determined that the proposed regulations will have no impact on the creation of new or the elimination of existing jobs or businesses within California or affect the expansion of businesses currently doing business in California. The Department has determined that the proposed regulations will have no effect on the state’s environment because the proposed regulations relate strictly to the management of parolees. The Department has determined that the proposed regulations may ensure the health, safety and security of parolees, CDCR employees, contractors, and other persons and entities by establishing procedures for parolees required to provide a urinalysis sample.

COST IMPACTS ON REPRESENTATIVE PRIVATE PERSONS OR BUSINESSES:

The Department is not aware of any cost impacts that a representative private person or business would necessarily incur in reasonable compliance with the proposed action.

EFFECT ON SMALL BUSINESSES:

The Department has determined that the proposed regulations may not affect small businesses. It is determined that this action has no significant adverse economic impact on small business because they are not affected by the internal management of state prisons.

CONSIDERATION OF ALTERNATIVES:

The Department must determine that no reasonable alternative considered, or that has otherwise been identified and brought to the attention of the Department, would be more effective in carrying out the purpose for which this action is proposed, would be as effective and less burdensome to affected private persons than the action proposed, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Currently, no reasonable alternatives have been brought to the attention of the Department that would alter the Department’s initial determination.

AVAILABILITY OF PROPOSED TEXT AND INITIAL STATEMENT OF REASONS:

The Department has prepared, and will make available, the proposed text and the Initial Statement of Reasons (ISOR) of the proposed regulations. The rulemaking file for this regulatory action, which contains those items and all information on which the proposal is based (i.e., rulemaking file) is available to the public upon request directed to the Department's contact person. The proposed text, ISOR, and Notice of Proposed Action will also be made available on the Department's website <http://www.cdcr.ca.gov>.

AVAILABILITY OF THE FINAL STATEMENT OF REASONS:

Following its preparation, a copy of the Final Statement of Reasons may be obtained from the Department's contact person.

AVAILABILITY OF CHANGES TO PROPOSED TEXT:

After considering all timely and relevant comments received, the Department may adopt the proposed regulations substantially as described in this Notice. If the Department makes modifications which are sufficiently related to the originally proposed text, it will make the modified text (with the changes clearly indicated) available to the public for at least 15 days before the Department adopts the regulations as revised. Requests for copies of any modified regulation text should be directed to the contact person indicated in this Notice. The Department will accept written comments on the modified regulations for 15 days after the date on which they are made available.

TEXT OF PROPOSED REGULATIONS

In the following, all new language is indicated by underline and deleted text is indicated by ~~strikethrough~~.

California Code of Regulations, Title 15, Division 3, Adult Institutions, Programs, and Parole

Subchapter 6. Adult Parole

Article 10. Urinalysis Testing Program.

3620. Urinalysis Testing Program Policy

Subsection 3620(a) is amended to include a new revision date for a department form:

All parolees may be subject to Urinalysis (UA) Testing for prohibited substances, pursuant to section 3504. All confirmed positive UA test results must be addressed by intervention and/or sanctions to promote positive lifestyle changes.

(a) Parolees with a narcotic-related conviction within five years of incarceration for their current offense, or who have a history of alcohol or substance abuse, may have a special condition of parole imposed requiring UA testing at the direction of the Parole Agent (PA). Upon approval by the field Parole Unit Supervisor (US), the special condition of parole to participate in UA testing shall be imposed and documented on the CDCR Form 1515-Addendum (Rev. ~~04/13~~ 11/15), Special Conditions of Parole. If reasonable suspicion exists that a prohibited substance was recently used, the CDCR Form 1515 Addendum is not required for the PA to instruct the parolee to provide a UA specimen for testing.

Subsection 3620(a)(1) through 3620(d)(4) are unchanged

Note: Authority Cited: Sections 5058 and 5058.3, Penal Code. Reference: Sections 3060.9, 3063.1, 3063.2, 3068 and 5054, Penal Code.

3621. Instant Test Kit.

Subsection 3621(a)(1) is unchanged and shown for reference:

Collection of the UA test sample shall first be obtained by utilizing an onsite testing device which is an instant test kit. A positive or negative test result shall determine the next course of action.

(a) In the event of a negative instant test result, the PA shall have the parolee discard the sample and the test kit.

(1) No further laboratory confirmation is required.

Subsection 3621(a)(2) is amended to a new revision date for a department form:

(2) The negative test result shall be recorded on the CDCR Form 2249 (~~REV. 08/14~~ 10/15), Urinalysis Sample Control Log, which is incorporated by reference, and shall also be documented on the CDCR Form 1650-D (Rev. 06/12), Record of Supervision.

Subsection 3621(b) through 3621(e) are unchanged:

Note: Authority Cited: Sections 5058 and 5058.3, Penal Code. Reference: Sections 3060.9, 3063.1, 3063.2, 3068 and 5054, Penal Code.

3622. Tracking of Urinalysis Sample and Documentation.

Section 3622 is amended to read:

(a) In order to maintain the integrity of the chain of custody from point of receipt of the sample, the PA shall log every sample received by the parolee, and take the following steps:

(1) Enter the UA test sample on the CDCR Form 2249 (~~REV. 08/14~~ Rev. 10/15), Urinalysis Sample Control Log, to include the parolee's name, ~~parolee's signature~~, CDC number, PA's initials, collection date and time, and UA test results.

(2) For disputed positive test results requiring laboratory confirmation, the PA shall deposit the sample into the locked UA sample storage container pursuant to section 3623, and make an indication on the CDCR Form 2249 verifying that the sample was sent to the contract laboratory.

(3) Enter the sample collection event, the test result, and the outcome on the CDCR Form 1650-D (Rev. 06/12), Record of Supervision.

(4) Retain the CDCR Form 2249 within the parolee field book ~~or parole Field File.~~, and submit the CDCR Form 2249 to the Unit Supervisor with the caseload roster by last working day of the month, documenting all UA tests taken in the month.

(b) The PA shall deposit collected UA samples into the locked UA sample storage container upon returning to the parole unit, prior to the end of his or her shift, but no later than close of business the next business day.

Note: Authority Cited: Sections 5058 and 5058.3, Penal Code. Reference: Sections 3060.9, 3063.1, 3063.2, 3068 and 5054, Penal Code.

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

You shall comply with all of the following Special Conditions while you are on parole. Any exceptions must be approved in writing by the Unit Supervisor.

COURT IMPOSED

	REASON	INITIAL
<input type="checkbox"/> 1. You shall abide by any court imposed Special Conditions of Parole.	<input type="checkbox"/>	

SUBSTANCE ABUSE

	REASON	INITIAL
<input type="checkbox"/> 2. You shall submit to urinalysis testing when instructed to do so by a parole agent.	<input type="checkbox"/>	
<input type="checkbox"/> 3. You shall not consume, possess, or have access to any alcoholic beverages, liquors, or over-the-counter medication that contains alcohol; (e.g., Nyquil). You shall provide a urine or breath sample for the purpose of detecting the presence of alcohol.	<input type="checkbox"/>	
<input type="checkbox"/> 4. You shall not enter a business whose primary purpose is to sell or serve alcoholic beverages.	<input type="checkbox"/>	
<input type="checkbox"/> 5. You shall not use, possess, or distribute any narcotic or other controlled substance as defined by law or any paraphernalia related to such substances, without a valid prescription.	<input type="checkbox"/>	
<input type="checkbox"/> 6. You shall enroll in and successfully complete a substance abuse treatment program as directed by your parole agent or appropriate parole authority.	<input type="checkbox"/>	

TREATMENT

	REASON	INITIAL
<input type="checkbox"/> 7. You shall attend Parole Outpatient Clinic (POC) for an initial evaluation and remain in the mental health treatment program as deemed necessary by a POC clinician.	<input type="checkbox"/>	
<input type="checkbox"/> 8. You shall participate in a mental health treatment program as directed by your parole agent.	<input type="checkbox"/>	
<input type="checkbox"/> 9. You shall submit to psychological or physiological assessments to assist in treatment planning and/or parole supervision.	<input type="checkbox"/>	
<input type="checkbox"/> 10. You shall actively participate in a DAPO-approved treatment program specific to Sex Offenders.	<input type="checkbox"/>	
<input type="checkbox"/> 11. You shall report to, enroll in, and actively participate in outpatient sex offender treatment.	<input type="checkbox"/>	
<input type="checkbox"/> 12. You hereby agree to waive psychotherapist-patient privilege, and agree to polygraph examinations while on parole supervision.	<input type="checkbox"/>	
<input type="checkbox"/> 13. Upon reporting to outpatient sex offender treatment, you shall sign the forms presented by the treatment provider, including an information release form and a "Consent to Polygraph" form.	<input type="checkbox"/>	

CONTACT WITH MINORS

	REASON	INITIAL
<input type="checkbox"/> 14. You shall not have contact with any minor male/female you know or reasonably should know is under the age of 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological children.	<input type="checkbox"/>	
<input type="checkbox"/> 15. You shall not have any contact with any minor male/female you know or reasonably should know is between the ages of 13 and 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological children.	<input type="checkbox"/>	
<input type="checkbox"/> 16. You shall not have contact with your biological or adopted children. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, through electronic media, e-mail, computer, or through another person, etc.	<input type="checkbox"/>	
<input type="checkbox"/> 17. You shall immediately inform your parole agent regarding any contact with a minor. This includes "accidental" or "incidental" contact.	<input type="checkbox"/>	
<input type="checkbox"/> 18. You shall not enter or loiter within 250 Feet of the perimeter of places where children congregate; e.g., day care centers, schools, parks, playgrounds, video arcades, swimming pools, state fairgrounds, county fairgrounds, etc.	<input type="checkbox"/>	
<input type="checkbox"/> 19. You shall not enter any park where children regularly gather without prior written approval from your parole agent. The written approval must be kept with you while you are in the park.	<input type="checkbox"/>	

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

RELATIONSHIPS

		REASON	INITIAL
<input type="checkbox"/>	20. You shall not date, socialize or form a romantic interest or sexual relationship with any person who has physical custody of a minor.	<input type="checkbox"/>	
<input type="checkbox"/>	21. You shall inform all persons with whom you have a significant relationship (e.g., employer, dating, or roommate) about your criminal history, and you will inform your parole agent about the relationship.	<input type="checkbox"/>	
<input type="checkbox"/>	22. You shall inform all persons with whom you have a sexual or romantic relationship, that you have been diagnosed as having a communicable disease.	<input type="checkbox"/>	

VICTIM(S) [Provide the victim(s) full name(s). If unable to produce victim(s) name(s), supply the law enforcement agency case number(s) or DA case number and the conviction date(s).]

Name(s) of Victim(s): _____

		REASON	INITIAL
<input type="checkbox"/>	23. You shall not enter the premises, unnecessarily travel past, or loiter near where your victim frequents, resides, is employed, or attends classes.	<input type="checkbox"/>	
<input type="checkbox"/>	24. You shall not contact or attempt to contact your crime victim(s) or their immediate families. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc	<input type="checkbox"/>	
<input type="checkbox"/>	25. You shall not threaten, stalk, abuse, harass, or commit further violent acts against the victim(s).	<input type="checkbox"/>	
<input type="checkbox"/>	26. You shall not have in your possession any of your victim's personal effects; e.g., pictures, letters, etc.	<input type="checkbox"/>	

ASSOCIATION

		REASON	INITIAL
<input type="checkbox"/>	27. You shall not associate with any sex offenders except when approved in writing by your parole agent.	<input type="checkbox"/>	
<input type="checkbox"/>	28. You shall not have contact with co-defendants or other arrestees of your offenses. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc.	<input type="checkbox"/>	

TRAVEL

		REASON	INITIAL
<input type="checkbox"/>	29. You shall not travel more than _____ miles from your residence of record.	<input type="checkbox"/>	
<input type="checkbox"/>	30. You shall maintain and have in your possession a travel log which shall include: <i>(circle all that apply)</i> date and time of departure, destination, time of arrival, mileage, route taken, with whom, and include daily starting and ending mileage.	<input type="checkbox"/>	
<input type="checkbox"/>	31. You shall not hitchhike or pick up hitchhikers.	<input type="checkbox"/>	
<input type="checkbox"/>	32. You shall not enter or loiter within 100 yards of areas of sexual or pornographic activity, (e.g., adult bookstores, massage parlors, nude or topless bars, sex shops, etc.)	<input type="checkbox"/>	
<input type="checkbox"/>	33. You shall notify your parole agent in advance of operating any motor vehicle, providing the make, model, year, color, and license number.	<input type="checkbox"/>	

EMPLOYMENT

		REASON	INITIAL
<input type="checkbox"/>	34. Employment shall be pre-approved by your parole agent.	<input type="checkbox"/>	
<input type="checkbox"/>	35. You shall not obtain employment that allows you to enter a residence where a stranger resides.	<input type="checkbox"/>	
<input type="checkbox"/>	36. Volunteer work shall be preapproved by your parole agent.	<input type="checkbox"/>	

RESIDENCE

		REASON	INITIAL
<input type="checkbox"/>	37. You shall not reside in a residence with any person also required to register pursuant to PC Section 290, unless he or she is legally related to you by blood, marriage, or adoption. This does not include treatment programs and/or board and care facilities with the appropriate use permit.	<input type="checkbox"/>	

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

RESIDENCE

	REASON	INITIAL
<input type="checkbox"/> 38. You shall not reside within one-half mile of any public or private school (kindergarten and grades 1 to 12, inclusive) specific to PC 288 or 288.5.	<input type="checkbox"/>	
<input type="checkbox"/> 39. You shall not reside within 2,000 feet of any public or private school (kindergarten and grades 1 to 12, inclusive), or parks where children regularly congregate per PC Section 3003.5(b).	<input type="checkbox"/>	
<input type="checkbox"/> 40. You shall not reside in the county of _____.	<input type="checkbox"/>	
<input type="checkbox"/> 41. You shall be in your approved residence from _____ p.m. to _____ a.m.	<input type="checkbox"/>	
<input type="checkbox"/> 42. You shall not establish a residence that has not been preapproved by your parole agent.	<input type="checkbox"/>	
<input type="checkbox"/> 43. You shall not reside within 35 miles of your victim.	<input type="checkbox"/>	

POSSESSIONS

	REASON	INITIAL
<input type="checkbox"/> 44. You shall not possess, or have access to any sexually oriented or sexually stimulating objects and/or devices.	<input type="checkbox"/>	
<input type="checkbox"/> 45. You shall not view, possess, or have access to any pornographic material; e.g., movies, photographs, drawings, literature, etc.	<input type="checkbox"/>	
<input type="checkbox"/> 46. You shall not view, possess, or have access to any material; e.g., periodicals, newspapers, magazines, catalogs depicting adults or children in undergarments, nude, partially nude, etc.	<input type="checkbox"/>	
<input type="checkbox"/> 47. You shall not possess or have access to sexually oriented devices, handcuffs, handcuff keys, restraint equipment, or any other items that could be used for bondage, restraint, control, or confinement.	<input type="checkbox"/>	
<input type="checkbox"/> 48. You shall not possess or have access to children's clothing, toys, games, or other similar material related to children's interests.	<input type="checkbox"/>	
<input type="checkbox"/> 49. You shall not possess any household pets or animals including animals not traditionally considered household pets; e.g., snakes, lizards, gerbils, farm animals, etc.	<input type="checkbox"/>	
<input type="checkbox"/> 50. You shall not use or possess law enforcement identification, insignia, badges, uniforms, or other items identified with law enforcement.	<input type="checkbox"/>	
<input type="checkbox"/> 51. You shall not use, possess, or have access to surveillance equipment.	<input type="checkbox"/>	
<input type="checkbox"/> 52. You shall not use, possess, or have access to police radio scanners, or other telecommunications device(s) which monitor police radio transmission.	<input type="checkbox"/>	
<input type="checkbox"/> 53. You shall not wear, possess, purchase, or have access to costumes, masks, or other identity-concealing items.	<input type="checkbox"/>	
<input type="checkbox"/> 54. You shall not use or have access to a post office box, safe deposit box, storage facility, or locker.	<input type="checkbox"/>	
<input type="checkbox"/> 55. You shall not possess or have access to checks, money orders, or credit cards.	<input type="checkbox"/>	
<input type="checkbox"/> 56. You shall not possess or have access to latex, surgical, or any other type of gloves.	<input type="checkbox"/>	

GANG:

	REASON	INITIAL
<input type="checkbox"/> 57. You shall not contact or associate with any person you know or reasonably should know to be a member or associate of a prison gang, disruptive group, or street gang.	<input type="checkbox"/>	
<input type="checkbox"/> 58. You shall not violate any gang abatement injunction, ordinance, or court order.	<input type="checkbox"/>	
<input type="checkbox"/> 59. You shall not wear or carry on your person any clothing or apparel with gang colors, signs, symbols, or paraphernalia you know or reasonably should know to be associated with gang affiliation and/or activity.	<input type="checkbox"/>	
<input type="checkbox"/> 60. You shall not possess items such as photographs, written material, publications, jewelry, or any other items depicting or describing activity you know or reasonably should know are associated with gang activity.	<input type="checkbox"/>	

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

		REASON	INITIAL
<input type="checkbox"/>	61. You shall not be within 100 yards of _____, a known place of gang activity, loitering (delaying, lingering, or idling about), or congregating.	<input type="checkbox"/>	

FAMILY VIOLENCE:

		REASON	INITIAL
<input type="checkbox"/>	62. You shall enroll in and successfully complete a certified Batterer's Program. Enrollment shall occur within 30 days from the date of release.	<input type="checkbox"/>	
<input type="checkbox"/>	63. You shall enroll in and successfully complete a certified Parenting Program. Enrollment shall occur within 30 days from the date of release.	<input type="checkbox"/>	
<input type="checkbox"/>	64. You shall enroll in and successfully complete an Anger Management Program. Enrollment shall occur within 30 days from the date of release or 30 days from the signature of these conditions, whichever occurs last.	<input type="checkbox"/>	
<input type="checkbox"/>	65. You shall not come within 100 yards of the victim, the victim's residence, or the victim's workplace.	<input type="checkbox"/>	

GLOBAL POSITIONING SYSTEM (GPS)

		REASON	INITIAL
<input type="checkbox"/>	66. You shall participate in continuous electronic monitoring, e.g., Global Positioning System (GPS) technology.	<input type="checkbox"/>	
<input type="checkbox"/>	67. You may be charged criminally with grand theft, petty theft, or vandalism and be fined for the cost of the equipment's replacement in the event it is not returned, is purposely discarded, stolen, and/or damaged.	<input type="checkbox"/>	
<input type="checkbox"/>	68. You are approved for a GPS modification: You shall maintain the GPS device on your person or ambulatory device 24 hours a day, 7 days a week, except when showering or sleeping. When showering or sleeping, you must keep the device within reach of your person.	<input type="checkbox"/>	
<input type="checkbox"/>	69. You shall observe a _____ a.m. / p.m. to _____ a.m. / p.m. curfew and remain within your approved residence.	<input type="checkbox"/>	
<input type="checkbox"/>	70. You shall charge the GPS device at least two times per day (every 12 hours). Charge the device at _____ a.m. for at least 1 full hour. Charge the device at _____ p.m. for at least 1 full hour.	<input type="checkbox"/>	
<input type="checkbox"/>	71. You shall charge the GPS device for 1 hour within 10 minutes of receiving a low battery alert.	<input type="checkbox"/>	
<input type="checkbox"/>	72. You shall charge the GPS device at least two times per day (every 12 hours) for at least 1 full hour for each charging time.	<input type="checkbox"/>	
<input type="checkbox"/>	73. You shall not tamper with the device or cover the device with any material that you know or reasonably should know will interfere with the GPS signal.	<input type="checkbox"/>	
<input type="checkbox"/>	74. You shall contact your parole agent immediately if and when the device vibrates and/or makes an audible tone (beep).	<input type="checkbox"/>	
<input type="checkbox"/>	75. You shall not expose the device to extreme temperatures or place it under water; e.g., pool, hot tub, bath, etc.	<input type="checkbox"/>	

PC SECTION 290 TRANSIENT:

		REASON	INITIAL
<input type="checkbox"/>	76. If you are transient, you shall register as a transient and comply with all transient registration requirements pursuant to PC Section 290.011.	<input type="checkbox"/>	
<input type="checkbox"/>	77. If you are transient, you shall report to the parole office once a week on <i>(circle all that apply)</i> : M / T / W / TH / F / S / SU.	<input type="checkbox"/>	
<input type="checkbox"/>	78. If you are transient, you shall contact your parole agent and provide him or her with the exact location that you spent the previous night and where you plan on spending the next night.	<input type="checkbox"/>	
<input type="checkbox"/>	79. If you are transient, you shall complete a monthly report form each week and give it directly to your parole agent or to the Officer of the Day (if your agent is not in the office).	<input type="checkbox"/>	
<input type="checkbox"/>	80. If you are transient, you shall contact your parole agent by telephone between the hours of _____ a.m. and _____ p.m., on <i>(circle all that apply)</i> : M / T / W / TH / F / S / SU.	<input type="checkbox"/>	
<input type="checkbox"/>	81. If you are transient, you shall report to the following destination _____ on <i>(circle all that apply)</i> : M / T / W / TH / F / S / SU.	<input type="checkbox"/>	

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

COMPUTER USE AND ELECTRONIC MEDIA

		REASON	INITIAL
<input type="checkbox"/>	82. You shall not have access to or use a personal computer and peripheral devices.	<input type="checkbox"/>	
<input type="checkbox"/>	83. You shall not use or possess cameras, cell phones that include a camera, video cameras, or photography equipment of any kind.	<input type="checkbox"/>	
<input type="checkbox"/>	84. You shall not use or possess a cell phone of any kind.	<input type="checkbox"/>	
<input type="checkbox"/>	85. You shall agree to install, or allow to be installed at your own expense, equipment and/or software to monitor or limit computer use.	<input type="checkbox"/>	
<input type="checkbox"/>	86. You shall not use an electronic bulletin board system, internet relay chat channel, instant messaging, newsgroup, user group, peer to peer; e.g., Napster, Gnutella Freenet, etc. This would include any site-base; e.g., Hotmail, Gmail, or Yahoo e-mail, etc., which allows the user to have the ability to surf the internet undetected.	<input type="checkbox"/>	
<input type="checkbox"/>	87. You shall not use the computer for any purpose which might further sexual activity; e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.	<input type="checkbox"/>	
<input type="checkbox"/>	88. You shall not use the computer for any purpose which might further sexual activity involving minor children; e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.	<input type="checkbox"/>	
<input type="checkbox"/>	89. You shall not possess or view certain materials related to, or part of, the grooming cycle for your crime; e.g., images of your victim, stories or images related to your crime or similar crimes, images which depict individuals similar to your victims; e.g., children, stories written about or for individuals similar to your victim, materials focused on the culture of your victim; e.g., children's shows or web sites.	<input type="checkbox"/>	
<input type="checkbox"/>	90. You shall not use any method to hide or prevent unauthorized users from viewing specific data or files; e.g., encryption, cryptography, steganography, compression, password protected files. Log in and password information shall be provided to your parole agent upon request.	<input type="checkbox"/>	
<input type="checkbox"/>	91. You shall not alter or destroy records of computer use; e.g., delete or remove browser history data, possess software or items designed to boot into the memory in the computer, alter or "wipe" computer media, defeat forensic software, block monitoring software, restore a computer to a previous state, or reinstall operating systems, etc.	<input type="checkbox"/>	
<input type="checkbox"/>	92. You shall consent to announced or unannounced examination and/or search of electronic devices to which you have access for the limited purpose of detecting content prohibited by your conditions of parole or court order; e.g., hard disks, zip disks, floppy diskettes, CD ROMs, optical disks, thumb drives, magnetic tape, and/or any other storage media whether installed within a device or removable and separate from the actual computer device.	<input type="checkbox"/>	
<input type="checkbox"/>	93. You shall not view, possess, or have access to television sets or monitors for the purpose of viewing sexually explicit programming.	<input type="checkbox"/>	
<input type="checkbox"/>	94. You shall not view, possess, or have access to electronic media that depicts sexually explicit content.	<input type="checkbox"/>	

OTHER

		REASON	INITIAL
<input type="checkbox"/>	95. You shall not place or answer any type of personal advertisement seeking or soliciting a relationship with a stranger.	<input type="checkbox"/>	
<input type="checkbox"/>	96. You shall not use or access any telephone numbers designed for sexual arousal or stimulation.	<input type="checkbox"/>	

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

		REASON	INITIAL
<input type="checkbox"/>	97. You shall not use any fictitious names or change your name in an attempt to conceal your true identity or establish another identity.	<input type="checkbox"/>	
<input type="checkbox"/>	98. If you spend the night away from your residence of record, you shall notify your parole agent in advance. You shall provide all contact information, including the address and the telephone number.	<input type="checkbox"/>	
<input type="checkbox"/>	99. You shall not loiter (to delay, to linger, or to idle about) or be in the vicinity of:	<input type="checkbox"/>	
<input type="checkbox"/>	100. Unless you are a resident, you shall not enter or remain on the grounds of a day care or residential facility where elders or dependent adults are regularly present or living (PC 653c).	<input type="checkbox"/>	
<input type="checkbox"/>	101. You shall not use any public shower facility; join any health club, physical fitness training facility, or sports club.	<input type="checkbox"/>	
<input type="checkbox"/>	102. You shall wear clothing so as not to expose your genitals, breasts, or buttocks.	<input type="checkbox"/>	
<input type="checkbox"/>	103. You shall contact your parole agent within 24 hours of any type of law enforcement contact; e.g., traffic stop, identification check, suspect, witness, etc.	<input type="checkbox"/>	
<input type="checkbox"/>	104. You shall have your updated Penal Code 290 registration verification with you at all times. You must present it during any contact or interaction with any law enforcement officer.	<input type="checkbox"/>	
<input type="checkbox"/>	105. You shall observe a _____ a.m./p.m. to _____ a.m./p.m. curfew on Halloween and remain within your approved residence.	<input type="checkbox"/>	
<input type="checkbox"/>	106. You shall/shall not:	<input type="checkbox"/>	
<input type="checkbox"/>	107. You shall/shall not:	<input type="checkbox"/>	
<input type="checkbox"/>	108. Other information:	<input type="checkbox"/>	
<input type="checkbox"/>	109. Other information:	<input type="checkbox"/>	
<input type="checkbox"/>	110. Other information:	<input type="checkbox"/>	

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

REASONS FOR SPECIAL CONDITIONS OF PAROLE

Special conditions of parole can be imposed if there is a nexus or are reasonably related to the Subject's commitment offense, criminal conduct, and/or future criminality. A special condition of parole that bars lawful activity is valid only if the prohibited conduct either:

1. Has a relationship to the crime of which the offender was convicted.
2. Is reasonably related to deter future criminality.

Conditions may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality by regulating or prohibiting non-criminal conduct.

REASON CODES	DESCRIPTION
1.	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of illegal or illicit drug use.
2.	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of alcohol use and/or abuse, where continued use could result in criminal or harmful activity.
3.	Based on factors and circumstances directly related to the Subject's commitment offense(s), the imposition of this condition will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law. These factors include:
4.	Based on the nature of the commitment offense(s), a nexus exists between the behavior displayed during the course of committing his or her prior crime(s), and the behavior that is being restricted by imposing this condition. The nature of the commitment offense is described as:
5.	Based on previous offense(s) as noted in the Subject's criminal history, the restrictions imposed by this condition will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law. Previous offenses include:
6.	Based on previous offense(s) as noted in the Subject's probation or parole violation history, the restrictions imposed will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law, or additional violation of his or her conditional release. Previous violations include:
7.	Subject has a documented history of psychiatric/psychological illness and/or related symptoms.
8.	Parole Outpatient Clinic referral as required per PC 3002 and/or DAPO Parole Agent policy.
9.	Based on behavior displayed by offenders convicted of similar crimes, or displaying similar criminal behavior, imposition of this condition may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality.
10.	Based on current federal, State, or local laws, or Regulations cited in the California Code of Regulations, Title 15, as described below, this condition is imposed to ensure compliance with the following laws or regulations:

DELETE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

11.	Based on your lawful requirement to register as a sex offender pursuant to PC 290, you are subject to sex offender treatment programs pursuant to PC 3008(b).
12.	Subject has a current and/or prior sex offender conviction; therefore, residence is restricted per PC 3003.5(b), current and/or prior offense(s), arrests, and/or behavior as noted in the parolee's criminal history.
13.	GPS/electronic monitor use is authorized for use on Subject by PC 3010, 3010.1, 3010.5, 3010.7.
14.	Other good cause determined by parole agent as the specific condition controls those behaviors associated with subject's sexual deviancy and sex offender profile behavioral characteristics.
15.	Subject is a validated gang member.
16.	Subject has a documented history of gang involvement/activity/association.
17.	Subject has a current or prior conviction of PC 182.5 and PC 186.22.
18.	Parole Authority imposed Special Conditions of Parole:
19.	Parolee volunteered to participate in the 150-day aftercare program. This special condition is to be placed on all Treatment Incentive Program participants.
20.	Based on prior history of victimizing biological or adopted children and/or evidence of risk to family members.

PAROLEE NAME (TYPE- LAST, FIRST, MI)	PAROLEE'S SIGNATURE	CDC NUMBER	DATE SIGNED

PAROLE AGENT NAME	SIGNATURE	BADGE NO.	DATE
UNIT SUPERVISOR NAME	SIGNATURE	BADGE NO.	DATE

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

You shall comply with all of the following special conditions while you are on parole. Any exceptions must be approved in writing by the Unit Supervisor.

COURT IMPOSED

		REASON	INITIALS
<input type="checkbox"/>	1. You shall abide by any court imposed Special Conditions of Parole.		

SUBSTANCE ABUSE

<input type="checkbox"/>	2. You shall submit to urinalysis testing when instructed to do so by a parole agent.		
<input type="checkbox"/>	3. You shall not consume, possess, or have access to any alcoholic beverages, liquors, or over-the-counter medication that contains alcohol; (e.g., Nyquil). You shall provide a urine or breath sample for the purpose of detecting the presence of alcohol.		
<input type="checkbox"/>	4. You shall not enter a business whose primary purpose is to sell or serve alcoholic beverages.		
<input type="checkbox"/>	5. You shall not use, possess, or distribute any narcotic or other controlled substance as defined by law or any paraphernalia related to such substances, without a valid prescription.		
<input type="checkbox"/>	6. You shall enroll in and successfully complete a substance abuse treatment program as directed by your parole agent or appropriate parole authority.		

TREATMENT

<input type="checkbox"/>	7. You shall attend Parole Outpatient Clinic for an initial evaluation and remain in the mental health treatment program as deemed necessary by a Parole Outpatient Clinic clinician.		
<input type="checkbox"/>	8. You shall participate in a mental health treatment program as directed by your parole agent.		
<input type="checkbox"/>	9. You shall submit to psychological or physiological assessments to assist in treatment planning and/or parole supervision.		
<input type="checkbox"/>	10. You shall report to, enroll in, and actively participate in a Division of Adult Parole Operations approved treatment program specific to sex offenders.		
<input type="checkbox"/>	11. You hereby agree to polygraph examinations while on parole supervision, with the questioning limited to questions about the success of the sex offender treatment program, the crime(s) for which you were convicted, and related criminal behavior, whether past or future.		
<input type="checkbox"/>	12. You agree to and will sign any necessary documents including a waiver of the psychotherapist-patient privilege to allow full communication between your sex offender management professional and your parole agent as required by Penal Code (PC) Section 3008 (d)(4) and PC Section 290.09.		
<input type="checkbox"/>	13. Upon reporting to sex offender treatment, you shall sign the forms presented by the treatment provider, including an information release form and a "Consent to Polygraph" form.		

CONTACT WITH MINORS

<input type="checkbox"/>	14. You shall not have contact with any minor male/female you know or reasonably should know is under the age of 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, electronic media, computer, or through another person, etc., excluding biological or adopted children.		
<input type="checkbox"/>	15. You shall not have any contact with any minor male/female you know or reasonably should know is between the ages of 13 and 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, electronic media, computer, or through another person, etc., excluding biological or adopted children.		
<input type="checkbox"/>	16. You shall not have contact with your biological or adopted children. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, through electronic media, e-mail, computer, or through another person, etc.		
<input type="checkbox"/>	17. You shall immediately inform your parole agent regarding any contact with a minor. This includes "accidental" or "incidental" contact.		
<input type="checkbox"/>	18. You shall not enter or loiter within 250 feet of the perimeter of places where children congregate; e.g., day care centers, schools, parks, playgrounds, video arcades, swimming pools, state fairgrounds, county fairgrounds, etc.		
<input type="checkbox"/>	19. You shall not enter any school building or school grounds (kindergarten and grades 1 to 12, inclusive) unless for lawful business and written permission, indicating the dates and time, has been granted from the chief administrative official of the school.		
<input type="checkbox"/>	20. You shall not enter any park where children regularly gather without prior written approval from your parole agent. The written approval must be kept with you while you are in the park.		

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

RELATIONSHIPS

		REASON	INITIALS
<input type="checkbox"/>	21. You shall not date, socialize, or form a romantic interest or sexual relationship with any person who has physical custody of a minor.		
<input type="checkbox"/>	22. You shall inform all persons with whom you have a significant relationship; e.g., employer, dating, or roommate, about your criminal history, and you will inform your parole agent about the relationship.		
<input type="checkbox"/>	23. You shall inform all persons with whom you have a sexual or romantic relationship, that you have been diagnosed as having a communicable disease.		

VICTIM(S): Provide the victim(s) full name(s). If unable to produce victim(s) name(s), supply the law enforcement agency case number(s) or DA case number and the conviction date(s). *Name(s) of Victim(s):* _____

<input type="checkbox"/>	24. You shall not enter the premises, unnecessarily travel past, or loiter near where your victim frequents, resides, is employed, or attends classes.		
<input type="checkbox"/>	25. You shall not contact or attempt to contact your crime victim(s) or their immediate families. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, electronic media, computer, or through another person, etc.		
<input type="checkbox"/>	26. You shall not threaten, stalk, abuse, harass, or commit further violent acts against the victim(s).		
<input type="checkbox"/>	27. You shall not have in your possession any of your victim's personal effects; e.g., pictures, letters, etc.		

ASSOCIATION

<input type="checkbox"/>	28. You shall not associate with any known sex offenders except as previously approved or instructed by your parole agent.		
<input type="checkbox"/>	29. You shall not have contact with co-defendants or other arrestees of your offenses. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, electronic media, computer, or through another person, etc.		

TRAVEL

<input type="checkbox"/>	30. You shall not travel more than _____ miles from your residence of record.		
<input type="checkbox"/>	31. You shall maintain and have in your possession a travel log, which shall include date and time of departure, destination, time of arrival, mileage, route taken, with whom, and include daily starting and ending mileage.		
<input type="checkbox"/>	32. You shall not hitchhike or pick up hitchhikers.		
<input type="checkbox"/>	33. You shall not enter or loiter within 100 yards of areas of sexual or pornographic activity; e.g., adult bookstores, massage parlors, nude or topless bars, sex shops, etc.		
<input type="checkbox"/>	34. You shall notify your parole agent in advance of operating any motor vehicle, providing the make, model, year, color, and license number.		

EMPLOYMENT

<input type="checkbox"/>	35. Employment shall be pre-approved by your parole agent.		
<input type="checkbox"/>	36. You shall not obtain employment that allows you to enter a residence where a stranger resides.		
<input type="checkbox"/>	37. Volunteer work shall be preapproved by your parole agent.		

RESIDENCE

<input type="checkbox"/>	38. You shall not reside in a residence with any person also required to register pursuant to PC Section 290, unless he or she is legally related to you by blood, marriage, or adoption. This does not include treatment programs and/or board and care facilities with the appropriate use permit.		
<input type="checkbox"/>	39. You shall not reside within one-half mile of any public or private school (kindergarten and grades 1 through 12, inclusive) pursuant to PC Section 3003(g).		
<input type="checkbox"/>	40. You shall not reside within _____ feet of any public or private school (kindergarten and grades 1 through 12, inclusive).		
<input type="checkbox"/>	41. You shall not reside within _____ feet of any parks where children regularly congregate.		
<input type="checkbox"/>	42. You shall not reside in the county of _____.		
<input type="checkbox"/>	43. You shall be in your approved residence from _____ p.m. to _____ a.m.		
<input type="checkbox"/>	44. You shall not establish a residence that has not been preapproved by your parole agent.		
<input type="checkbox"/>	45. You shall not reside within 35 miles of your victim.		

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

POSSESSIONS

		REASON	INITIALS
<input type="checkbox"/>	46. You shall not possess, or have access to any sexually oriented or sexually stimulating objects and/or devices.		
<input type="checkbox"/>	47. You shall not view, possess, or have access to any pornographic material; e.g., movies, photographs, drawings, literature, etc.		
<input type="checkbox"/>	48. You shall not view, possess, or have access to any material; e.g., periodicals, newspapers, magazines, catalogs depicting adults or children in undergarments, nude, partially nude, etc.		
<input type="checkbox"/>	49. You shall not possess or have access to sexually oriented devices, handcuffs, handcuff keys, restraint equipment, or any other items that could be used for bondage, restraint, control, or confinement.		
<input type="checkbox"/>	50. You shall not possess or have access to children's clothing, toys, games, or other similar material related to children's interests.		
<input type="checkbox"/>	51. You shall not possess any household pets or animals including animals not traditionally considered household pets; e.g., snakes, lizards, gerbils, farm animals, etc.		
<input type="checkbox"/>	52. You shall not use or possess law enforcement identification, insignia, badges, uniforms, or other items identified with law enforcement.		
<input type="checkbox"/>	53. You shall not use, possess, or have access to surveillance equipment.		
<input type="checkbox"/>	54. You shall not use, possess, or have access to police radio scanners, or other telecommunications device(s) which monitor police radio transmission.		
<input type="checkbox"/>	55. You shall not wear, possess, purchase, or have access to costumes, masks, or other identity-concealing items.		
<input type="checkbox"/>	56. You shall not use or have access to a post office box, safe deposit box, storage facility, or locker.		
<input type="checkbox"/>	57. You shall not possess or have access to checks, money orders, or credit cards.		
<input type="checkbox"/>	58. You shall not possess or have access to latex, surgical, or any other type of gloves.		

GANG

<input type="checkbox"/>	59. You shall not contact or associate with any person you know or reasonably should know to be a member or associate of a prison gang, disruptive group, or street gang.		
<input type="checkbox"/>	60. You shall not violate any gang abatement injunction, ordinance, or court order.		
<input type="checkbox"/>	61. You shall not wear or carry on your person any clothing or apparel with gang colors, signs, symbols, or paraphernalia you know or reasonably should know to be associated with gang affiliation and/or activity.		
<input type="checkbox"/>	62. You shall not possess items such as photographs, written material, publications, jewelry, or any other items depicting or describing activity you know or reasonably should know are associated with gang activity.		
<input type="checkbox"/>	63. You shall not be within 100 yards of: _____, a known place of gang activity, loitering (delaying, lingering, or idling about), or congregating.		

FAMILY VIOLENCE

<input type="checkbox"/>	64. You shall enroll in and successfully complete a certified Batterer's Program. Enrollment shall occur within 30 days from the date of release.		
<input type="checkbox"/>	65. You shall enroll in and successfully complete a certified Parenting Program. Enrollment shall occur within 30 days from the date of release.		
<input type="checkbox"/>	66. You shall enroll in and successfully complete an Anger Management Program. Enrollment shall occur within 30 days from the date of release or 30 days from the signature of these conditions, whichever occurs last.		
<input type="checkbox"/>	67. You shall not come within 100 yards of the victim, the victim's residence, or the victim's workplace.		

GLOBAL POSITIONING SYSTEM (GPS)

<input type="checkbox"/>	68. You shall participate in continuous electronic monitoring; e.g., GPS technology. I understand and acknowledge the GPS device continuously records my location and provides data to the Division of Adult Parole Operations. I understand and acknowledge the data is retained indefinitely and may be shared with other law enforcement agencies.		
<input type="checkbox"/>	69. You may be charged criminally with grand theft, petty theft, or vandalism and be fined for the cost of the equipment's replacement in the event it is not returned, is purposely discarded, stolen, and/or damaged.		
<input type="checkbox"/>	70. You are approved for a GPS modification. You shall maintain the GPS device on your person or ambulatory device 24 hours a day, 7 days a week, except when showering or sleeping. When showering or sleeping, you must keep the device within reach of your person.		
<input type="checkbox"/>	71. You shall observe a _____ a.m./p.m. to _____ a.m./p.m. curfew and remain within your approved residence.		
<input type="checkbox"/>	72. You shall charge the GPS device at least two times per day (every 12 hours). Charge the device at _____ a.m. for at least 1 full hour. Charge the device at _____ p.m. for at least 1 full hour.		

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

GLOBAL POSITIONING SYSTEM (GPS) (CONTINUED)

		REASON	INITIALS
<input type="checkbox"/>	73. You shall charge the GPS device at least two times per day (every 12 hours) for at least 1 full hour for each charging time.		
<input type="checkbox"/>	74. You shall not tamper with the device or cover the device with any material that you know or reasonably should know will interfere with the GPS signal.		
<input type="checkbox"/>	75. You shall contact your parole agent immediately if, and when the device vibrates and/or makes an audible tone or beep.		
<input type="checkbox"/>	76. You shall not expose the device to extreme temperatures or place it under water; e.g., pool, hot tub, bath, etc.		

PC SECTION 290 TRANSIENT

<input type="checkbox"/>	77. If you are transient, you shall register as a transient and comply with all transient registration requirements pursuant to PC Section 290.011.		
<input type="checkbox"/>	78. If you are transient, you shall contact your parole agent by telephone between the hours of _____ a.m. and _____ p.m. on (circle all that apply): M / T / W / TH / F / S / SU.		
<input type="checkbox"/>	79. If you are transient, you shall report to the following destination: _____, on (circle all that apply): M / T / W / TH / F / S / SU.		

COMPUTER USE AND ELECTRONIC MEDIA

<input type="checkbox"/>	80. You shall not have access to or use a personal computer and peripheral devices; e.g., printer, scanner, camera, storage devices, etc.		
<input type="checkbox"/>	81. You shall not use or possess cameras, cell phones that include a camera, video cameras, or photography equipment of any kind.		
<input type="checkbox"/>	82. You shall not use or possess a cell phone of any kind.		
<input type="checkbox"/>	83. You shall agree to install, or allow to be installed at your own expense, equipment and/or software to monitor or limit computer use.		
<input type="checkbox"/>	84. You shall not use or access social media sites, social networking sites, peer-to-peer networks, or computer or cellular instant messaging systems; e.g., Facebook, Instagram, Twitter, Snapchat, Lync, Gmail, Yahoo, KIK Messenger, Tumblr, etc. This would include any site which allows the user to have the ability to navigate the internet undetected.		
<input type="checkbox"/>	85. You shall not use the computer for any purpose which might further sexual activity; e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files, or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.		
<input type="checkbox"/>	86. You shall not use the computer for any purpose which might further sexual activity involving minor children, (e.g., possession of sexually explicit material in any form, sexually related "chat" or e-mail exchange, visiting or joining "chat rooms" which contain sexually explicit conversations, visiting/viewing sexually explicit material on web sites, downloading text or video files, digital images in any format, text files, or multi-media material that is sexual in nature, or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content).		
<input type="checkbox"/>	87. You shall not possess or view certain materials related to, or part of, the grooming cycle for your crime, e.g., images of your victim, stories or images related to your crime or similar crimes, images which depict individuals similar to your victims, (e.g., children, stories written about, or for individuals similar to your victim); or materials focused on the culture of your victim, (e.g., children's shows or web sites).		
<input type="checkbox"/>	88. You shall not use any method to hide or prevent unauthorized users from viewing specific data or files, (e.g., encryption, cryptography, steganography, compression, or password protected files). Login and password information shall be provided to your parole agent upon request.		
<input type="checkbox"/>	89. You shall not alter or destroy records of computer use; e.g., delete or remove browser history data, possess software or items designed to boot into the computer memory, alter or "wipe" computer media, defeat forensic software, block monitoring software, restore a computer to a previous state, or reinstall operating systems, etc.		
<input type="checkbox"/>	90. You shall consent to announced or unannounced examination and/or search of electronic devices to which you have access for the limited purpose of detecting content prohibited by your parole conditions or by court order; e.g., hard disks, DVDs, CDs, zip disks, floppy disks, thumb drives, and/or any other storage media whether installed within a device or removable and separate from the actual computer device.		
<input type="checkbox"/>	91. You shall not view, possess, or have access to programming for the purpose of viewing sexually explicit programming through televisions or any type of monitor.		
<input type="checkbox"/>	92. You shall not view, possess, or have access to electronic media that depicts sexually explicit content.		

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

OTHER

		REASON	INITIAL
<input type="checkbox"/>	93. You shall not place or answer any type of personal advertisement seeking or soliciting a relationship with a stranger.		
<input type="checkbox"/>	94. You shall not use or access any telephone numbers designed for sexual arousal or stimulation.		
<input type="checkbox"/>	95. You shall not use any fictitious names or change your name in an attempt to conceal your true identity or establish another identity.		
<input type="checkbox"/>	96. If you spend the night away from your residence of record, you shall notify your parole agent in advance. You shall provide all contact information, including the address and the telephone number.		
<input type="checkbox"/>	97. You shall not loiter (delay, linger, or idle about) or be in the vicinity of: _____.		
<input type="checkbox"/>	98. Unless you are a resident, you shall not enter or remain on the grounds of a day care or residential facility where elders or dependent adults are regularly present or living (PC Section 653c).		
<input type="checkbox"/>	99. You shall not use any public shower facility; join any health club, physical fitness training facility, or sports club.		
<input type="checkbox"/>	100. You shall wear clothing so as not to expose your genitals, breasts, or buttocks.		
<input type="checkbox"/>	101. You shall contact your parole agent within 24 hours of any type of law enforcement contact; e.g., traffic stop, identification check, suspect, witness, etc.		
<input type="checkbox"/>	102. You shall have your updated PC Section 290 registration verification with you at all times. You must present it during any contact or interaction with any law enforcement officer.		
<input type="checkbox"/>	103. You shall observe a _____ a.m./p.m. to _____ a.m./p.m. curfew on Halloween, and remain within your approved residence.		
<input type="checkbox"/>	104. You shall/shall not:		
<input type="checkbox"/>	105. You shall/shall not:		
<input type="checkbox"/>	106. Other information:		
<input type="checkbox"/>	107. Other information:		
<input type="checkbox"/>	108. Other information:		

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

REASONS FOR SPECIAL CONDITIONS OF PAROLE

Special conditions can be imposed if there is a nexus or the conditions reasonably related to the subject's commitment offense, criminal conduct, and/or future criminality. A special condition that bars lawful activity is valid only if the prohibited conduct either:

1. Has a relationship to the crime of which the offender was convicted.
2. Is reasonably related to deter future criminality.

Conditions may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality by regulating or prohibiting non-criminal conduct.

REASON CODES	DESCRIPTION
1	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of illegal or illicit drug use.
2	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of alcohol use and/or abuse, where continued use could result in criminal or harmful activity.
3	Based on factors and circumstances directly related to the subject's commitment offense(s), the imposition of this condition will assist in the goal of preventing the subject from committing subsequent criminal offenses under Federal, State, or local law. These factors include:
4	Based on the nature of the commitment offense(s), a nexus exists between the behavior displayed during the course of committing his or her prior crime(s) and the behavior that is being restricted by imposing this condition. The nature of the commitment offense is described as:
5	Based on previous offense(s) as noted in the subject's criminal history, the restrictions imposed by this condition will assist in the goal of preventing the subject from committing subsequent criminal offenses under Federal, State, or local law. Previous offenses include:
6	Based on previous offense(s) as noted in the subject's probation or parole violation history, the restrictions imposed will assist in the goal of preventing the subject from committing subsequent criminal offenses under Federal, State, or local law, or additional violation of his or her conditional release. Previous violations include:
7	Subject has a documented history of psychiatric/psychological illness and/or related symptoms.
8	Parole Outpatient Clinic referral as required per PC Section 3002 and/or Division of Adult Parole Operations policy.
9	Based on behavior displayed by offenders convicted of similar crimes, or displaying similar criminal behavior, imposition of this condition may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality.
10	Based on current Federal, State, or local laws, or regulations cited in the California Code of Regulations, Title 15, as described below, this condition is imposed to ensure compliance with the following laws or regulations:

PAROLEE NAME: _____ CDC NUMBER: _____ DATE: _____

REASON CODES	DESCRIPTION (cont.)
11	Based on your lawful requirement to register as a sex offender pursuant to PC Section 290, you are subject to sex offender treatment programs pursuant to PC Section 3008(b).
12	GPS/Electronic Monitoring is authorized for use on subject by PC Sections 3010, 3010.1, 3010.5, 3010.7.
13	Other good cause determined by parole agent as the specific condition controls those behaviors associated with subject's sexual deviancy and sex offender profile behavioral characteristics.
14	Subject is a validated gang member.
15	Subject has a documented history of gang involvement/activity/association.
16	Subject has a current or prior conviction of PC Sections 182.5 and 186.22.
17	Parole authority imposed special conditions:
18	Parolee volunteered to participate in the 150-day aftercare program. This special condition is to be placed on all Treatment Incentive Program participants.
19	Based on prior history of victimizing biological or adopted children and/or evidence of risk to family members.

PAROLEE'S NAME (LAST, FIRST, M.I.)	PAROLEE'S SIGNATURE	CDC NUMBER	DATE SIGNED

PAROLE AGENT'S NAME	PAROLE AGENT'S SIGNATURE	BADGE NO.	DATE SIGNED

UNIT SUPERVISOR'S NAME	UNIT SUPERVISOR'S SIGNATURE	BADGE NO.	DATE SIGNED

INITIAL STATEMENT OF REASONS:

The California Department of Corrections and Rehabilitation (CDCR) proposes to amend the California Code of Regulations (CCR), Title 15, Division 3, Subchapter 6, Article 10, concerning the urinalysis testing program operated by the Division of Adult Parole Operations (DAPO).

Urinalysis testing is conducted by DAPO staff to determine if offenders under DAPO's supervision are using illicit substances. Urinalysis testing is a special condition of parole imposed on offenders who have a history of narcotics or alcohol abuse, a narcotic or alcohol-related conviction, or when narcotics or alcohol use was an element of the offender's commitment offense.

In January 2015, DAPO implemented new testing protocols, described in Article 10, to include the use of "instant" test kits. These kits include collection bottles with litmus paper that can instantly test the urine. This change was made to provide more immediate results and reduce costs to the State by reducing the number of urine samples requiring confirmation by a laboratory. The new protocols also include the use of the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log, which is incorporated by reference.

The Department has determined that staff does not need to obtain the offender's signature on the CDCR 2249. Since the form is not attached to the urine collection test kit, nor is it submitted to the lab, the parolee's signature on the form does not have any relevance to chain of custody. Additionally, removing the requirement to obtain the parolee's signature will reduce the number of tasks for Parole Agents required to collect a urine sample which will improve efficiency. Therefore, DAPO has amended the CDCR 2249 to remove the parolee's signature blocks.

Currently, the CDCR 2249 is retained by the Parole Agent in the field file. The new procedure will require that the Parole Agent submits the form each month to the Unit Supervisor as an attachment to the caseload roster.

Consideration of Alternatives:

The Department must determine that no reasonable alternative considered, or that has otherwise been identified and brought to the attention of the Department, would be more effective in carrying out the purpose for which this action is proposed, would be as effective and less burdensome to affected private persons than the action proposed, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Currently, no reasonable alternatives have been brought to the attention of the Department that would alter the Department's initial determination.

Economic Impact Assessment:

The Department has determined that the proposed regulations will have no impact on the creation of new or the elimination of existing jobs or businesses within California or affect the expansion of businesses currently doing business in California. The Department has determined that the proposed regulations will have no effect on the state's environment because the proposed regulations relate strictly to the management of parolees. The Department has determined that the proposed regulations may ensure the health, safety and security of parolees, CDCR employees, contractors, and other persons and entities by establishing procedures for parolees required to provide a urinalysis sample.

In accordance with Government Code section 11346.3(b), CDCR has made the following assessments regarding the proposed regulations:

Creation of New or the Elimination of Existing Jobs Within the State of California

The Department has determined that the proposed regulations will not have an impact on the creation of new, or the elimination of existing jobs within California.

Creation of New or the Elimination of Existing Businesses Within the State of California

The Department has determined that the proposed regulations will not have an impact on the creation of new, or the elimination of existing business within California.

Expansion of Businesses Currently Doing Business in the State of California

The Department has determined that the proposed regulations will not have an impact on the expansion of businesses currently doing business in California.

Significant Adverse Economic Impact on Business

The Department has made an initial determination that the proposed regulatory action will not have a significant adverse impact on business in the State of California because those businesses are not affected by the internal management of offenders.

Benefits of the Regulations

The proposed regulatory action may protect public health and safety and worker safety, and will benefit CDCR staff and parolees by providing direction on urinalysis sample collection. Urinalysis test kits include collection bottles with litmus paper that can instantly test the urine. This reduces the number of urine samples requiring confirmation by a laboratory. These protocols also include the use of the CDCR 2249 (Rev. 10/15), Urinalysis Sample Control Log.

The Department has determined that staff does not need to obtain the parolee's signature on the CDCR 2249. Removing the requirement to obtain the parolee's signature improve efficiency.

Materials Relied Upon:

The Department, in proposing amendments to these regulations, has not identified nor has it relied upon any technical, theoretical, or empirical study, report, or similar document.

Specific Purpose and Rationale for each Section, per Government Code section 11346.2(b)(1):

Title 15. Crime Prevention and Corrections

Division 3. Adult Institutions, Programs and Parole

Chapter 1. Rules and Regulations of Adult Operations and Programs

Subchapter 6. Adult Parole

Article 10. Urinalysis Testing Program (Refs & Annos)

Subsection 3620(a) is amended to change the revision date of the CDCR Form 1515-Addendum from 04/13 to 11/15. This is an update to the revision date only; this form is not being revised as part of this regulatory

action. The CDCR 1515-Addendum is already incorporated by reference in Title 15, section 3763, Petition for Revocation.

Subsection 3620(a)(1) through 3620(d)(4) are unchanged.

Subsection 3621(a)(1) is unchanged.

Subsection 3621(a)(2) is amended to update the revision date of the CDCR Form 2249, Urinalysis Sample Control Log from 08/14 to 10/15. The CDCR form 2249 was revised to remove “Parolee Signature” from the form.

Subsection 3622(a)(1) is amended to update the revision date of the CDCR Form 2249, Urinalysis Sample Control Log from 08/14 to 10/15. It is further amended to remove the words “parolee’s signature” as this is no longer a requirement on the CDCR 2249. The Department has determined that staff does not need to obtain the offender’s signature on the CDCR 2249. Since the form is not attached to the urine collection test kit, nor is it submitted to the lab, the parolee’s signature on the form does not have any relevance to chain of custody.

Subsection 3621(b) through 3621(e) are unchanged.

Subsection 3622(a)(2) through 3622(a)(2) are unchanged.

Subsection 3622(a)(4) is amended to change the procedures for retaining the CDCR 2249. Currently the CDCR 2249 is retained by the Parole Agent in the field file. This procedure will require that the Parole Agent submits the form each month to the Unit Supervisor as an attachment to the caseload roster. This change will improve record retention.

Subsection 3622(b) is unchanged.