

# PINE COUNTY

## VETERANS RESTORATIVE JUSTICE PROGRAM RULES

As a participant, you will be required to abide by the rules outlined in the Participant Contract and Probation Agreement as well as those outlined here in the Participant Handbook. These rules apply to ALL phases:

1. I understand I am not to possess or consume any mood-altering chemicals or illegal substances. "Possess" means to have on my person, in my home or vehicle. This includes alcohol, and any substances containing alcohol (See list for examples). The misuse of over-the-counter and prescription medications are Prohibited. It is my responsibility to discuss using over-the-counter and prescription medications with my Probation Officer prior to using them. Medications producing "false-positive" drug tests will not be an excuse. If I am on medications for a documented medical condition, I must provide proof (to my Probation Officer) from my doctor within 24 hours. \_\_\_\_\_
2. I understand that I must submit to random alcohol and drug testing as requested by probation and/or law enforcement (on behalf of probation), and I am responsible for all costs related to testing. I will provide my UA sample within 1 hour of the request. \_\_\_\_\_
3. I must not use or possess any urinalysis adulterating products or substances for the purpose of tampering with my UA sample. I will submit to a search of my person and/or my personal belongings for these items. A diluted test results when a person drinks excessive amounts of liquids or takes other chemicals to conceal their use prior to chemical testing. I will not engage in any of the above behavior. \_\_\_\_\_
4. I will not engage in any assaultive, abusive, or threatening behavior towards participants, staff, court personnel or community members. \_\_\_\_\_
5. I shall not use or possess any firearms, ammunition, or explosives. \_\_\_\_\_
6. If ordered to complete a chemical use assessment and/or treatment, I will follow all recommendations of my chemical use assessment, including any court ordered treatment programs or sober support groups as directed by probation. I will sign a release of information for these programs, so that my probation agent may speak with program staff. Revoking any such releases will be considered failure to comply with probation. \_\_\_\_\_

7. I shall comply with all other programming requests (in addition to phase requirements) which include, but are not limited to: cognitive groups, domestic violence groups, community-based support groups, recommendations by the VA and pay for. \_\_\_\_\_
8. I shall attend all VRJP court sessions as scheduled. I will report to my Probation Officer as directed and will arrange transportation for scheduled and required meetings. \_\_\_\_\_
9. I shall report any plan of change of residence prior to moving, and changes in your work schedule or employment status within 24 hours. I must also report any changes in your phone number or contact information within 24 hours. If my phone number is disconnected or I cannot receive calls, I will find another way to notify my Probation Officer immediately. Failure to update address or phone number could result in a sanction. \_\_\_\_\_
10. I understand that employment will be verified on an ongoing basis. If I am not gainfully employed or attending an approved vocational or educational program, I must be involved in an approved job seeking/training component or completing community service. I will furnish a weekly schedule to include employment, school, CWS, and other activities, if requested by my Probation Officer. \_\_\_\_\_
11. I understand that Pine County Probation Officers can conduct random and unannounced visits to my home and place of employment to perform compliance checks for the use or possession of alcohol and/or illegal drugs. I understand that this can happen at any time, 24 hours a day/7 days a week. \_\_\_\_\_
12. I understand that my Probation Officer may contact law enforcement agencies, professional treatment staff and significant family members to make sure that I am following my probation and program rules. \_\_\_\_\_
13. I will not leave the state of Minnesota for over a 24 hour period without the knowledge and prior permission of my probation agent. I will inform my Probation Officer two weeks' prior to the planned travel. To do so will be seen as flight, and a warrant could be issued for my arrest. I further understand that I may be required to sign a waiver of extradition if requested by my Probation Officer. \_\_\_\_\_
14. I will not violate any municipal, state or federal laws during supervision. I will immediately notify my Probation Officer if I have ANY contact with law enforcement. This also applies if you are with other people who are stopped. When in doubt, communicate with your Probation Officer. \_\_\_\_\_



