



**Fresno County Sheriff's Office
Transition from Jail to Community Program**

PARTICIPANT CONTRACT

Name: _____

JID #: _____

In addition to the rules and regulations governing your incarceration, the following describes the obligations and benefits of participating in the Transition from Jail to Community Program (TJC).

I understand that:

I will receive an individually prescribed transition plan to assist me in my efforts to successfully transition back to the community.

The validity of this contract is conditioned upon my eligibility for the Transition from Jail to Community Program. If at any time after the execution of this agreement and in any phase of the TJC, it is discovered that I am, in fact, ineligible to participate in the program, I may be immediately terminated from the program and/or housing unit.

During the entire course of the TJC program and while in custody, I will be required to attend case management meetings, treatment and programming sessions, work assignments, and have regular and frequent contact with the TJC staff. I agree to participate and abide by the prescribed programs, treatments, rules and regulations; I may be immediately terminated from the program and/or housing unit.

I agree to execute the Authorization for Release of Information for all TJC program related assessments and all associated records, including confidential substance abuse information.

Participation in the TJC program is a privilege and not a right and it is a unique opportunity to obtain information, skills, services and associations to help me change my life and fulfill my potential. I promise to give the TJC program my honest and best efforts.

I have read the above contract and I understand what I have read. I am willing to enter into this agreement with the Fresno County Sheriff's Office Transition from Jail to Community Program.

Participant's Signature

Date

Correctional Staff Signature

Date