



UTAH COUNTY SHERIFF'S OFFICE

**SHERIFF**

MICHAEL L. SMITH

WORK DIVERSION AGREEMENT

I, \_\_\_\_\_, (Print name) hereby apply for approval to participate in the Utah County Work Diversion Program. I understand that I have been sentenced to serve a jail commitment and participation in the Work Diversion Program is not a right, but a privilege and is a condition of my probation, parole or sentence, which is prescribed by law. I agree to abide by the Rules and Regulations of the Utah County Work Diversion Program and the following conditions:

1. \_\_\_\_\_ I agree to make a program fee payment of **\$25 each month** I am in the program, due on the final Thursday of each month. The program fee payments will be paid by **money order or cashiers check made out to the UTAH COUNTY JAIL**. I also agree I will pay \$150 for DNA testing if required by the State of Utah. Fees are paid in advance at the Jail Industries Building. I understand I will not be allowed to work if the program fee is not paid and I will be terminated from the program for non-payment as well.
2. \_\_\_\_\_ I agree to work a **minimum of four days each month** as scheduled with the Work Diversion deputies and if I fail to do so, I may be terminated from the program.
3. \_\_\_\_\_ I agree to notify Work Diversion (**851-4273**) prior to the beginning of my scheduled work day if I am ill or need to reschedule. I further agree that if I miss more than one day in a two month period without calling to reschedule, I may be terminated from the program and a letter stating such will be sent to the sentencing court.
4. \_\_\_\_\_ I understand that the Work Diversion Program requires that I perform manual labor. I am physically able to perform manual labor and have no physical conditions which would prevent me from participating in the Work Diversion Program. I also understand that if I am injured or suffer any health related problems while participating in the Work Diversion Program, it is my personal obligation to pay for all medical related expenses.
5. \_\_\_\_\_ I agree to wear all applicable safety equipment at all times, i.e., gloves, safety glasses and safety vest. I agree to provide my own gloves. The safety vest will be given to all Work Diversion inmates each day. **If I am found to have purposefully damage the vest, I will be required to pay a \$25.00 replacement fee**. All safety equipment must be in good condition and must be approved by the Deputy supervising the Work Diversion Program prior to my participation.
6. \_\_\_\_\_ I agree to consume no alcohol, narcotics, controlled substances and/or drugs which would impair my ability to work, for at least 24 hours prior to my reporting to participate in the Work Diversion Program.
7. \_\_\_\_\_ I agree that the clothing I wear will be in compliance with the Rules and Regulations of the Work Diversion Program.
8. \_\_\_\_\_ I agree to comply with all requests of the Work Diversion Deputy and/or other supervisor in completing my work assignments including those in case of emergency situations.
9. \_\_\_\_\_ I agree that while I am participating in the Work Diversion Program I will not possess any item which is prohibited by law, nor will I possess weapons of any kind.
10. \_\_\_\_\_ I agree to report to the designated meeting place as scheduled, on time, to serve my commitment.
11. \_\_\_\_\_ I agree that I will not violate any criminal law of any municipality, city, the State of Utah or the Federal government while enrolled in the Work Diversion Program.
12. \_\_\_\_\_ I agree to submit to a breath, urine, and/or blood test at any time a supervising Work Diversion Deputy deems necessary.
13. \_\_\_\_\_ I agree that **I will not allow** any friend, child, family member or others **to visit me, bring me lunch or a drink**, while I am participating in the Work Diversion Program.
14. \_\_\_\_\_ I agree to provide my own sack lunch each day I participate in the Work Diversion Program.
15. \_\_\_\_\_ I agree that **I will not engage in any physical contact felt to be sexual in nature, comments of a sexual nature, or sexual harassment of any such behavior** may result in my immediate termination from the Work Diversion Program and/or incarceration.
16. \_\_\_\_\_ I agree that in the event I violate any section of this agreement, I will void this agreement and will be removed from the Work Diversion program. My actions will be reported to the appropriate court and my probation officer for further action and I may be incarcerated until my commitment has been completed.

\_\_\_\_\_  
Signature / Date

\_\_\_\_\_  
Witness / Date

*Address - 3075 North Main Spanish Fork, Utah 84660*

*Phone - 801-851-4000*