

INMATE TELEVISION AGREEMENT FORM
(Inmate Owned Televisions)

Inmate Name: _____

DOC Number: _____

Prior to receiving a personally owned television set, the inmate must agree to the following conditions and sign this agreement.

1. I understand that if I tamper with, alter, and/or damage the television set, I will lose the privilege of possessing that television or a state owned television set.
2. I may temporarily lose possession of my television if my behavior is inappropriate. **Examples** of inappropriate behavior (not limited to the following):
 - Refuses to return eating utensils or food tray
 - Fails to clean or maintain cell in an orderly fashion
 - Personal hygiene is poor and will not take a shower or clean up.
 - Pounds on cell door, shower wall or door, or exercise area door.
 - Fails to comply with escort procedures to and from the telephone, shower and/or exercise areas.
 - Fails to turn in bedding and clothing for regular washing.
3. Time frame for Loss of Television Privileges is three (3) days.

I confirm by my signature that I **understand** this agreement and will abide by the stipulations.

Inmate Signature / Date

Staff Signature / Date