

**INMATE TELEVISION AGREEMENT FORM**  
(State Owned Televisions)

**Inmate Name:** \_\_\_\_\_

**DOC Number:** \_\_\_\_\_

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

1. I agree to sign a Voucher for the price of the television set.
2. I understand that if I tamper with, alter, or destroy the television set/cable I will be charged with the repair/replacement cost.
3. Prior to receiving another television, I must pay for the repair/replacement cost(s) in full.
4. I may temporarily lose possession of a 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.
5. 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