

Kittitas County Sheriff's Office

Work/School Release Program

INTRODUCTION

The information contained in this packet is provided to answer questions you may have regarding your eligibility to participate in the Kittitas County Sheriff's Office Work/School Release Program. An application for participation is also provided.

Participants will receive 1/6 goodtime credit. Total Work/School Release Program fees will be based on the daily fee multiplied by the amount of time a participant will spend in custody. In the event earned goodtime is lost, and the offender can continue to participate on the program, fees will be adjusted to reflect the additional days in custody.

Participation in the Work/School Release Program always requires compliance with the Basic Eligibility Rules and the Rules for Participation. For any violation of these rules, an offender otherwise eligible for work release may be denied entry into, or continued participation in, the program. If a participant violates the conditions of, or no longer meets the basic eligibility for the program, any funds paid for participation are non-refundable.

BASIC ELIGIBILITY RULES

- A. Work/School release application eligibility must be in the offender's sentence or court commitment.
- B. The sentence must include confinement for at least five consecutive days.
- C. Participants must pay a \$25.00 application fee, payable at the time of application return, prior to determination of eligibility.
- D. Participants must arrange for their own transportation between work sites and the facility. A participant who drives a vehicle for this purpose must possess a valid driver's license, proof of insurance, vehicle registration certificate and current license tabs. You may be asked to provide copies of those documents for proof. If a participant uses public transportation, his or her work schedule must reasonably coincide with the transit schedule as not to allow for/or require an excessive amount of time waiting for buses.
- E. Place of employment must be within 45 miles of the Jail.
- F. The Sergeant or their designee will make eligibility determinations.
- G. "On call" employment may be grounds for denial of program participation.
- H. Employment or education that requires you to be away from the facility for longer than 16 hours per day or does not allow for regularly defined hours of work or attendance may be grounds for denial.

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- I. If accepted to participate, any change of employment, education, treatment programs, or the hours, schedule, or location of employment, education, or treatment must be immediately reported to jail staff and at least 72 hours in advance to determine eligibility.

PARTICIPATION FEES

A COPY OF YOUR MOST RECENT PAY STUB IS REQUIRED WITH THE RETURN OF YOUR WORK RELEASE APPLICATION.

Daily participation fees are based on your documented wage (verification will be required from your employer). A sliding scale determines your daily fee by multiplying your hourly wage by 173.33 (normal average monthly hours). This amount is then multiplied by .01. Any partial dollar amount is rounded to the closest dollar. This fee is then multiplied by 7 for the weekly fee. The fees range from the minimum of \$29.00 per day to the maximum of \$63.00 per day, pursuant to standards adopted from time to time by the Kittitas County Sheriff. **Program fees will be paid weekly, in advance.**

Example:

If your hourly wage is \$16.28 (WA state Minimum Wage for 2024) per hour: 173.33
 $x \$16.28 = \$2,821.81 \times .01 = 28.21$ or \$29.00 per day

There is a minimum \$29.00 per day fee, and a maximum \$63.00 per day fee.

Commitments from outside of Kittitas County will be charged a flat fee of \$63.00 a day.

ALL PROGRAM FEES ARE NON-REFUNDABLE

Please allow 5 business days for application review. A representative from the Kittitas County Sheriff's Office will contact you at the provided phone number on the application to let you know it has been completed and your status. Please be aware that turning in this application at the time of your commitment will still require the necessary allotted timeframe for review.

FREQUENTLY ASKED QUESTIONS

Will the corrections staff wake me or tell me when it's time for work? -

Yes, a deputy will wake you (if needed) prior to release for work.

How do I get my work clothes washed?

- The Kittitas County Jail will utilize Inmate Workers to wash your laundry. One single bag will be provided with a tag that you can give to staff to have your clothes washed not more than twice weekly. The Kittitas County Sheriff's Office is not liable for damage to clothing during washing. They will not be separated and washed based

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on color or material. They will be washed all together to ensure your clothes get back to you as they were turned in.

How many changes of clothing do I need to bring?

- You can bring one week's worth of work/school clothing. This includes necessary footwear, outerwear, etc. that your job/school and/or travel requires, and you can't leave at the site or in your vehicle.

How long after I turn in my application before I can start my jail time?

- The application process can take up to 5 business days. Allow 5 business days for the application to be reviewed before your court ordered start date. The Kittitas County Sheriff's Office cannot grant any extensions to a court ordered start date.

When do I make my first work release payment?

- The first payment will be due when you turn yourself in to start your jail sentence. You will then be required to make a payment every week. Failure to make your weekly payment can result in your removal from the program. If you do not have these funds at the time you turn yourself in your entrance into the program will be denied until you do have the funds.

If you have any other questions or concerns (except regarding your application status), please contact the Kittitas County Jail at 509-962-7527 and speak to staff.

PERSONAL HISTORY

PERSONAL DATA

Name: _____, _____ Date of Birth: ____/____/____
Last, First Middle

Home Address: _____ Telephone: (____)____-____
City: _____ State: _____ Zip: _____

Place of Birth: _____
City State Country

Drivers License or ID Number: _____ Issuing State: _____

CHARGE INFORMATION (Please attach a copy of your Commitment/Sentencing paperwork)

Current Charge or Charges: _____

Case Numbers: _____

Sentencing Court: _____ Sentencing Judge: _____

Date Sentence is to Begin: ____/____/____ Number of Days to Serve: _____

ARREST HISTORY

List all previous arrests, use additional paper if necessary.

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Date	Arresting Agency	City/State	Charges	Disposition

PROBATION

Are You on Probation? ☐ Yes ☐ No If yes, how long? _____

For? _____

Probation Officer: _____ Telephone: (____)____ - _____ ext _____

WORK/SCHOOL INFORMATION

Name of Employer/School: _____ Telephone: (____)____ - _____

Address: _____ Supervisor Name: _____

SCHEDULE

SUN	MON	TUES	WED	THURS	FRI	SAT

If your schedule changes/rotates each week, please use additional paper or provide a copy of your work/class schedule

TRANSPORTATION INFORMATION

What arrangements have you made for your transportation to and from work/school? If transit will be used for transportation, indicate below all transfer points and times also include with the application a copy of a valid bus schedule indicating the bus times and routes.

Give full name of driver(s) if private individual is providing transportation:

If you will drive yourself, provide the following information:

Driver's License Number and Issuing State: _____

Vehicle Make: _____ Model: _____ Year: _____

Color: _____ Vehicle License Number: _____

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I understand that I am responsible for providing my transportation to and from my place of work/school, to and from medical and probation officer visits, and to and from any other appointment approved by the Program Manager or their designee. I also hold Kittitas County, the Kittitas County Sheriff, the Kittitas County Sheriff’s Office and its employees harmless of liability for any incidents that may occur during such transportation and do so indicate by my signature below.

Signature/Date

MEDICAL INFORMATION

Do you have a medical condition or medical history where a doctor’s orders require special considerations or medications? ☐ Yes ☐ No If so, describe below:

Written verification of such doctor’s orders will be required for review and approval by the Jail medical provider.

Are you required to take any prescription medications? ☐ Yes ☐ No If so, give the names and prescribed dosage requirements below:

MEDICATION NAME	DOSAGE	HOW MANY TIMES DAILY

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ALL PRESCRIPTION MEDICATION MUST BE PRESENTED TO JAIL STAFF FOR APPROVAL. ALL MEDICATIONS MUST BE PRESENTED TO STAFF IN THEIR PROPER PRESCRIPTION CONTAINER OR PACKAGING.

MEDICAL INFORMATION RELEASE FORM

As a participant on the Kittitas County Sheriff's Office Work/School Release program, I hereby authorize any practitioner or health care provider to release medical information to the designee regarding any treatment that I may receive while participating on the Work/School Release program.

I understand that this information will be used as verification of my whereabouts during authorized leaves of absence from the facility for necessary medical or dental treatment.

Signature/Date

MEDICAL APPOINTMENTS AND CARE

Participants on the Kittitas County Sheriff's Work/School Release Program are responsible for scheduling medical appointments, receiving prior approval from the Jail Staff **72 hours** in advance to attend medical appointments, and are responsible for any costs incurred due to medical treatment. If emergency medical treatment is required while at the jail, staff may provide transportation as a courtesy to the participant or may call for an ambulance. Any cost incurred for ambulance transport will also be the responsibility of the participant.

By my signature I state that I understand the preceding stipulations:

Signature/Date

SECURITY AND SEARCHES

Participants on the Kittitas County Sheriff's Work/School Release Program are subject to search. Searches may include a property/belonging, pat down, unclothed search, or by body scanner. Refusal to submit to the security screening process upon entry each day will be cause for the removal from the program.

By my signature I state that I understand the preceding stipulations:

Signature/Date

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