

CALUMET COUNTY CORRECTIONAL FACILITY

206 Court Street
Chilton, WI 53014

Phone: (920) 849-1447/Fax: (920) 849-1489

Website: www.calumetcounty.org

Calumet County Correctional Facility Reporting Dates and Court Bookings need to be scheduled.

Please call (920) 849-1447 to schedule a date and time.

Medical booking will be done when nurse is here.

HUBER/WORK RELEASE RULES AND REQUIREMENTS

1. If convicted of an alcohol related offense, you must have scheduled and paid for the AODA assessment prior to reporting. Please bring proof with you on the report date.
2. You will be charged a \$25 booking fee, \$1.50 for hygiene products and \$20 a day for Huber fees. Please bring one week's worth of Huber fees with you on the day your report. The total amount one week Huber fees, booking fee and hygiene will be \$166.50. If you fall behind on payment of Huber Fees, you may not be released for work.
3. If you are currently taking any medications, please bring them with you in a current prescription bottle. You are responsible for your prescriptions and getting them filled.
4. You must report clean and sober. You will be tested upon arrival. If you are not clean it may delay your work release.
5. If you are going to drive yourself to work, you must bring with you proof of current registration and insurance for the vehicle that you will be driving. Please park in the south parking lot across the street from the county building furthest row back. If you will be having someone else drive you they must provide us with their driver's license, current registration and proof of insurance for the vehicle.
6. You must call ahead and schedule a day to report to the correctional facility.
7. All employment must be verified before you are allowed to go to work.
8. Any employment involving family or relatives must be approved by a supervisor.

Prior to reporting to the correctional facility to serve your sentence, you must complete the following forms and/or bring in the required information:

1. Work Information Form
2. Work Schedule on Company Letterhead
3. Self Employed Daily Itinerary Form

Reporting to the correctional facility without properly completing these forms may delay your release for work until the information is obtained and verified.

Inmates must report to the correctional facility clean and sober. Failure to do so will delay your release for work.

HUBER LAW PRIVILEGE

The Huber Law/Work Release privilege was established by statute so incarcerated persons can maintain their employment, continue to support their families, and meet other obligations. The approval of work release, child care, self-employment, etc., is at the discretion of the Sheriff or his designee.

If you are sentenced with Huber Law privileges while you are incarcerated, it is your responsibility to submit the proper information to initiate the Huber set-up process. This includes, documentation of employment (work schedule on company letterhead), childcare (birth certificate of child), school (class schedule), medical appointment (appointment card or verification sent from facility), etc. You will not be set up for your Huber activity if you do not provide proper documentation. Refer to Huber packet for detailed requirements. All steps must be completed before you will be allowed to leave the correctional facility for job interviews, appointments, etc.

Employment applications may be sent to the correctional facility via the U.S. Postal Service, dropped off at the lobby window by a friend or family member or faxed to the correctional facility. Potential employers must contact the correctional facility to set up interviews.

Completed applications may be picked up at the facility window by a friend or family member, delivered by mail through the U.S. Postal Service, or faxed to the potential employer

General Information

You and your property, including lockers and vehicles, may be searched at any time to ensure the safety and security of the correctional facility. It is your responsibility to secure your property in your locker with the correctional facility issued locks. The correctional facility is not responsible for any lost or stolen items.

You will not be allowed to work more than six days in a row nor will you be allowed out of the correctional facility for more than twelve hours in one day, including travel time.

You will not be allowed to work outside an adjacent county without permission.

Huber inmates will not be allowed to leave (work, childcare, etc.) on legal holidays unless there is an appropriate written request from their employer and approval is received by the Correctional facility Sergeant at least 72 hours prior to the requested shift

You may not work for other inmates without prior approval.

If you are self-employed, you must show proof of that employment when you register to serve your sentence. This will include pay and tax records, liability insurance, federal tax ID number, etc. If you are a subcontractor, you must show proof as required by Wisconsin State Statute 102.07. In both cases, there must be a working phone where you can be reached at all times.

If you want to work for a friend or relative, you must show proof that prior to incarceration you were employed by them. This will include pay and tax records and proof of workman's compensation insurance coverage as forms of proof of legitimate employment. At least minimum wage must be earned for each hour worked.

You may be strip searched at any time, which may include a body cavity search performed by qualified medical personnel.

If you are released for work, school (except high school), childcare, etc., you will be charged a daily fee, set by the county ordinance. You must keep up on payments or you will be held in from work. This fee will be charged everyday regardless if you work or are scheduled off. If you are held in from your Huber activity due to discipline, you are required to pay Huber fees for the days held in. Inmates who have been sentenced to fifteen days or less, serving consecutive weekends, or those who will not receive a paycheck during their sentence, shall pay their Huber room and board in advance.

If you are approved to transfer from this Correctional facility to another county, you will be charged a one-time \$15.00 administrative fee. This must be paid before transferring.

You will not be permitted to bring food, drinks, newspapers, books, magazines, suitcases, or a cellphone into the facility, or store such items in your locker.

You will not be allowed to schedule any medical or dental appointments without prior approval. Once approved, all non-emergency appointments need to be scheduled in conjunction with time you are out to work or childcare. In accordance with section 53.38 of the Wisconsin Statutes, you are responsible for all medical expenses incurred while you are incarcerated.

You may be released to attend court proceedings that you are a party of or for which you have been subpoenaed as a witness. It is your responsibility to deliver to our staff any paperwork showing the details of your pending out-of-county court case/s so arrangements can be made for your attendance.

Money Requests

You may request your money by asking for the disbursement book on Wednesday mornings at breakfast. Checks will be handed out on Thursdays. Checks may be made out to whomever you request, but cannot be made out to another inmate. You must indicate the amount of money you are requesting as well as a first and last name of the recipient. Your writing must be legible. You may request an unlimited amount of money, up to the balance of your account. Your request will be granted unless your Huber fees, medical fees, etc. are not up to date.

Bag Lunches

If you are scheduled to be out of the facility during a meal, you will be eligible to receive a bag lunch for each daily meal that you will miss. All bag lunches are to be consumed at the place of employment. Inmates are not allowed to leave their place of employment or worksite for a break or meal.

Laundry

You will be required to launder your work clothing on a regular basis. Washers and dryers are available in the Huber locker rooms and are to be used prior to leaving for work or upon your return from work (based upon your schedule), **not both**. You are not permitted to wash your clothes outside of the facility or bring in new clothes daily. Laundry soap may be purchased from commissary, or you may submit a one-time request to the Sergeant to purchase some to keep in your locker.

You may request a one-time drop off of work clothes if it is necessary.

DO NOT sit on the washers and dryers in the locker room. .

All items must be placed in your provided locker. **You may not wear any personal clothing into your housing unit.**

Leaving the Facility for a Scheduled Huber Activity

Huber release will be based on travel time and your schedule. You must be ready for release from the Huber dorm wearing only your uniform (no undergarments or socks).

Items you take out of the facility, other than necessary paperwork, will not be allowed back in. Those items will remain in your locker in the locker room. You may not leave the facility with any outgoing mail. All outgoing mail must be submitted to Correctional Staff for postal delivery.

Huber inmates must have advanced approval by a Sergeant if riding with another Huber. It may be considered if they work for the same employer and have the same hours.

All changes to work schedules **must** be approved by a Sergeant. This includes overtime, which should be sent to the correctional facility on company letterhead. Plan accordingly for weekends.

Hygiene

You must shower upon your return from work/child care in the locker room. There is a list of approved items you may order off of commissary, to be placed in your locker for your use. Once the item is in your locker, it will not be allowed back in your housing unit.

Prescriptions

If your doctor orders a prescription for you, you may stop at a pharmacy that is on your way from your appointment or work to have it filled **with prior approval** from Correctional Staff. The prescription must be from the approved facility medication list. You must inform Correctional Staff prior to leaving the Doctor's Office if you will be stopping at the pharmacy. **DO NOT TAKE ANY MEDICATION BEFORE RETURNING TO THE FACILITY.** You must turn all medications over to an Officer when you return to the facility. All medications brought into the facility by Huber inmates will need to be approved by medical staff for set-up. Staff will give the medication at approved times (medication pass times and before leaving for or returning from work).

HUBER RULES AND REGULATIONS

1. You must follow all rules at the Calumet County Correctional Facility.
2. You will be assigned a locker with a key for the lock to securely store your personal property. Storing and securing your personal items is your responsibility. The correctional facility is not responsible for lost items. Your items must fit inside your locker. Items left outside are subject to disposal.
3. You are strictly prohibited from contacting, or having someone else contact, for any reason, any employee of the Calumet County Sheriff's Office outside of their employment.
4. You are not allowed to consume any alcoholic product/beverage, use unauthorized medication/drugs, or any other controlled substance. If you are suspected of violating this rule you will be required to submit to a breath test, urine analysis, or both. Refusal to do so will result in disciplinary proceedings. If the results are positive, you will pay for the cost of the test. This rule will be enforced at the time of booking. You must turn in completely sober.
5. You will provide your own transportation. The transportation must be approved, and if there are any changes during your incarceration period, the changes must be approved prior to being effective. You are not permitted to drive a motor vehicle to and from work without a valid driver's license, proof of vehicle registration, and proof of current insurance. This information must be brought in at the time of set-up. Vehicles violating the parking guidelines are subject to ticket and tow at the inmate's expense. Any and all forms of transportation must meet or exceed all State Statutory requirements. This includes bicycles.
6. If a court order requires installation of an Ignition Interlock Device on every vehicle owned by you, you must provide a copy of such installation within two weeks after the court issues the order. Failure to comply with such order does not allow the Sheriff's Office to release you for Huber privileges.
7. If you have been granted Huber Law privileges for the purpose of childcare, you are not allowed to have any other adults in the home. Persons attending childcare will be permitted to attend only those functions approved by the correctional facility staff, and may not leave the residence without prior approval. You must have a working phone with you at all times. You must be the mother, father, or legal guardian of the child (children) being attended to. Spousal employment, days, and hours will be verified before childcare is permitted. Those hours will be the only hours you will be allowed to be at your home. The child/children must be present at the residence while you are there for childcare purposes.
8. You must travel to your approved Huber destination by a route that is the most direct. You are to go directly to your approved destination, remain there and return directly to the facility when you are finished. Unless you have permission from an officer, do not stop ANYWHERE on the way to or from your approved destination.
9. At any time a person identified as a police officer shows up at your job site, you must present and identify yourself to that officer IMMEDIATELY.
10. You must notify Correctional Staff immediately of ANY changes regarding your employment status, travel arrangements, child care, school status, etc.
11. You may not go to your home, at any time, without permission from an Officer.

12. You are not to loiter in any area of the Sheriff's Office or Correctional Facility, including the grounds outside. When you return from your Huber activity you must immediately enter the building.
13. Paychecks shall be mailed by your employer to the Calumet County Correctional Facility, unless you are required by your employer to have direct deposit. If you receive a paper paycheck, you must turn it over to an Officer upon your return to the facility and it will be deposited into your account.
It is your responsibility to make sure you have enough funds in your account to stay current on your Huber fees.
14. Upon returning from your Huber activity, you must report in immediately to the officer (via intercom button at the Huber entrance) and follow the instructions of that person.
15. In case of inclement weather, or for any other reason, if you cannot return to the correctional facility, you must spend this period of time at a police agency. Under NO circumstances will you stay at a private residence. In this event, you are to call 920-849-1447 (Correctional Facility) or 920-849-2335 (Sheriff's Office).
16. Your living area must be kept in a clean and orderly fashion at all times. Your bunk must be properly made and all personal items must be kept in your storage bin. Any items other than shoes found on the floor will be subject to disposal.
17. You will not be permitted to have unauthorized contact with family/friends while out on Huber. This includes in person, writing, internet, and /or telephone.
18. Cellphone use while out on Huber is not allowed unless it has been pre-approved by Correctional Staff for work purposes only. Your cell phone number must be given to Correctional Staff prior to being let out for work. Cell phones are not allowed into the facility and must be kept in your vehicle or at your work place.

Violation of any of the rules will result in disciplinary actions such as:

- Revocation of Huber Law privilege
- Loss of privileges
- Segregation
- Loss of "good time" earned
- Criminal Prosecution

PROPERTY ALLOWED IN THE HUBER DORM

Upon admission into the Calumet County Correctional Facility, you will be allowed to bring in the following items. **This will be your only opportunity.** Replacement items/products must be purchased from the correctional facility commissary.

- One alarm clock – not batteries, must be a wind-up clock
- Two small hair bands
- Two pencils without eraser
- One tablet of writing paper – no spiral bound
- Five embossed envelopes (no loose stamps)
- Bible or Koran (soft covered)
- Three photos – photos deemed inappropriate will be held in safekeeping and returned to the inmate upon release
- One pair of prescription glasses
- Dentures
- Hearing aids

- Legal materials
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ALLOWABLE WORK CLOTHING AND RELATED ITEMS

The following items are not allowed in the Huber dorm but may be kept in your changing room locker for use at work:

- Five changes of work clothes (pants and shirts)
 - Five pairs of underwear for work
 - Five pairs of socks
 - One pair of shoes and/or boots
 - One seasonal jacket/coat
 - One pair of seasonal gloves
 - One hat
 - Three bras for work (no under-wire)
 - Rain gear
 - A minimal amount of cash
 - Shampoo (must be in original packaging and a clear bottle)
 - Body wash/Bar soap (must be in original packaging and a clear bottle)
 - Conditioner (must be in original packaging)
 - Toothbrush
 - Toothpaste
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HUBER LAW/WORK RELEASE EMPLOYMENT INFORMATION

INMATE NAME: _____ DATE: _____

This section must be completed by your employer before reporting to start your correctional facility sentence. Failure to do so will delay you in going to work until the correctional staff has the opportunity to obtain and verify the information.

EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

EMPLOYER PHONE NUMBER: _____

NAME OF SUPERVISOR: _____

EMPLOYMENT HOURS: _____ RATE OF PAY: _____

HOW OFTEN PAID: _____ DAY OF WEEK PAID: _____

SIGNATURE OF COMPANY REPRESENTATIVE: _____

Correctional Officer Verifying: _____ Date/Time: _____

TRANSPORTATION INFORMATION:

Will you be driving your own vehicle? YES/NO

If yes, list vehicle license number: _____

If no, list means of transportation: _____

DRIVER'S NAME: _____

DRIVER'S ADDRESS: _____

DRIVER'S PHONE NUMBER: _____

VEHICLE LICENSE NUMBER: _____

All multiple drivers or any change of transportation must be recorded on the reverse side with the authorizing correctional officer's initials and date.

Department Use Only:

10-28 on file: _____ 10-27 on file: _____ Vehicle liability insurance on file: _____

Comments: _____

Alcohol Assessment Complied With? Yes _____ No _____

Correctional officer verifying above information: _____

Reporting to the correctional facility without properly completing these forms or providing proof of alcohol assessment may delay your release for work until the information is obtained and verified.

HUBER/WORK RELEASE (SELF EMPLOYED) DAILY ITINERARY

INMATE NAME: _____ DATE: _____

PLACE OF JOB SITE: _____

ADDRESS: _____

PHONE NUMBER: _____

ESTIMATED TIME OF ARRIVAL: _____ A.M./P.M.

ESTIMATED TIME OF DEPARTURE: _____ A.M./P.M.

PLACE OF JOB SITE: _____

ADDRESS: _____

PHONE NUMBER: _____

ESTIMATED TIME OF ARRIVAL: _____ A.M./P.M.

ESTIMATED TIME OF DEPARTURE: _____ A.M./P.M.

PLACE OF JOB SITE: _____

ADDRESS: _____

PHONE NUMBER: _____

ESTIMATED TIME OF ARRIVAL: _____ A.M./P.M.

ESTIMATED TIME OF DEPARTURE: _____ A.M./P.M.

PLACE OF JOB SITE: _____

ADDRESS: _____

PHONE NUMBER: _____

ESTIMATED TIME OF ARRIVAL: _____ A.M./P.M.

ESTIMATED TIME OF DEPARTURE: _____ A.M./P.M.

Failure to be at the indicated locations will result in loss of Huber Release Privileges.

HUBER LAW FAMILY/CHILDCARE INFORMATION SHEET

INMATE NAME: _____ DATE: _____

- | | | |
|----|-----------------------------------|-------|
| 1. | NAMES OF CHILDREN BEING CARED FOR | AGE |
| | _____ | _____ |
| | _____ | _____ |
| | _____ | _____ |
| | _____ | _____ |

2. ADDRESS WHERE CARE WILL OCCUR _____
LAND LINE PHONE NUMBER AT THIS ADDRESS _____

_____ 3. Provide Copies of Children’s Birth Certificate noting the inmate is a parent of the child.

_____ 4. If applicable, provide copy of a Court Order indicating the inmate has custody of the child or is the legal guardian of the child.

_____ 5. Provide proof that the requested family/childcare is necessary. Such proof will consist of the following:

_____ • A letter submitted by the inmate’s spouse or family member indicating the requested care is necessary, that the inmate had provided the necessary care in the past, and why another family member is unable to provide such care.

_____ • If the request is for childcare, provide a copy of your spouse’s work schedule submitted on company letterhead.

6. TIME OF REQUESTED CARE (HOURS) _____ M TO _____ M

TRANSPORTATION INFORMATION:

Will you be driving your own vehicle? YES/NO

If yes, list vehicle license number: _____

If no, list means of transportation: _____

DRIVER’S NAME: _____

DRIVER’S ADDRESS: _____

DRIVER’S PHONE NUMBER: _____

VEHICLE LICENSE NUMBER: _____

All multiple drivers or any change of transportation must be recorded on the reverse side with the authorizing correctional officer's initials and date.

Department Use Only:

10-28 on file: _____ 10-27 on file: _____ Vehicle liability insurance on file: _____

Comments: _____

Alcohol Assessment Complied With? Yes _____ No _____

Correctional officer verifying above information: _____

Reporting to the correctional facility without properly completing these forms or providing proof of alcohol assessment may delay your release for work until the information is obtained and verified.