

County/Cause Number: _____

Initial Probation Agreement

I, _____, having been granted probation with further order of the Court being that I be under the supervision of the Judicial District Department of Correctional Services, as provided by Chapter 907, Code of Iowa. I hereby agree that I will be subject to the following rules:

- 1 _____ I will secure and maintain employment, an educational program or referral programs, as approved by my Probation Officer:
 - If I am employed, I will provide proof of employment.
 - If I am unemployed, I will daily seek employment as directed by my Probation Officer and provide proof of that activity.
 - If I am involved in an educational or referral program, I will attend and provide proof of that activity.
 - I will not change my employment or educational program without prior approval of my Probation Officer. If terminated, I will notify my Probation Officer.
- 2 _____ I will not own, possess, or use a firearm or dangerous weapon, as statutorily defined. (702.7)
- 3 _____ I will obey all Federal, State and Local Laws. I will contact my Probation Officer within 24 hours after receiving a summons, being arrested, or contacted by a law enforcement official. I will submit to a search of my person, property, residence, vehicle, or personal effects at any time with or without a search warrant or arrest warrant, if reasonable suspicion exists, by a peace officer or Probation/Parole Officer.
- 4 _____ I will maintain residence as approved by my Probation Officer and will secure prior permission before changing said residence. Upon the request of my Probation Officer, I can be required to change residence at any time.
- 5 _____ I will NOT travel outside my county of residence or the State of Iowa without permission from my Probation Officer. Travel outside the State of Iowa may be required in writing. Approval by the Court is required for travel outside the United States.
- 6 _____ I will maintain contact with my Probation Officer as required, including written reports. If I cannot keep my appointment, I will contact my Probation Officer in ADVANCE
 - a) I will call **(515) 242-6680** for **traditional probation**.
 - b) **Low Risk Probation** (515) 242-6760, group briefing appointment is at 1000 Washington Avenue on _____ at _____ with Jill Daye or Donault Moore
- 7 _____ I shall abstain from the use of alcoholic beverages. I shall not enter taverns, liquor stores or other establishments where the primary activity is the sale of alcoholic beverages. I shall not use any drugs unless prescribed for me by a licensed physician and will not use or possess any illegal drugs or any prescription drugs for which I do not have a valid prescription. I agree to submit to urinalysis and/or alcohol testing upon the request of my Probation Officer or any law enforcement officer. I will not associate with drug users and/or sellers.
- 8 _____ I will have a valid driver's license and liability insurance (or proof of financial responsibility) on any motor vehicle that I own or operate. If I do not have either, I will actively pursue a valid driver's license and liability insurance if I intend to own or operate a motor vehicle.
- 9 _____
 - a) I will pay restitution, court-appointed attorney fees, Court costs, civil penalties, fines and surcharges as ordered by the Court. I will support my dependents and fulfill all my financial obligations to the best of my ability.
 - b) I will pay the enrollment (supervision) fee of \$300 required by Section 905.14 of the Code of Iowa to the Department of Correctional Services
- 10 _____ I will not lie to, mislead, or misinform my Probation Officer either by statement or omission of information. I will treat others with respect and will not assault, threaten, or intimidate any person. I will not associate with persons known to or suspected of engaging in illegal or questionable activities.
- 11 _____ I will abide by all Orders of the Court including submitting to DNA testing, if required by the Code of Iowa.

SPECIAL CONDITIONS: _____

I understand that my failure to comply with above will be deemed to be a violation of the terms and conditions of probation, for which my probation may be revoked by the Court or in my being transferred to a more restrictive level of the Department's corrections continuum, including, but not limited to, placement in a residential facility.

Entering into any informant-type activity with any law enforcement agency will not excuse liability for any violation of my probation supervision. I hereby waive extradition from any state or County to the State of Iowa if I am arrested for an Iowa probation violation warrant. I understand that I may file a formal grievance through the established Department Grievance Procedures against actions of the Department.

I hereby certify that I have read (or had read to me) the above agreement, and that I do understand and agree that it shall be in full force and effect until I have received my final discharge from probation. I further certify I have received a copy of this probation agreement.

Probation Officer Signature

Date

Defendant's Signature

Date