PROGRAM APPLICATION and AGREEMENT

The Challenge Incarceration Program (CIP) is an intensive, structured, and disciplined facility program with a high level of incarcerated person accountability and control and with direct and related consequences for failure to meet behavioral expectations.

The Challenge Incarceration Program is governed by Minnesota Statutes 244.17, 244.171 and 244.172 and DOC Policy 204.060, "Challenge Incarceration Program - Phase I."

CIP Eligibility Criteria: Less than 13 months remaining from date of anticipated CIP intake to CRD.

Eligible Incarcerated Individuals	• Who are release violators, must complete their terms of reimprisonment before they can be released on Phase II • Who have previously participated in CIP, may reenter CIP on the same obligation based on Commissioner's discretion

Not Eligible Incarcerated Individuals
Have been convicted and committed to the commissioner of corrections in the preceding ten years, with a sentence for the following: murder, manslaughter, criminal sexual conduct, assault, kidnapping, robbery, arson, carjacking, or any other offense involving death or intentional personal injury; includes aiding and abetting
Have been convicted or adjudicated delinquent within the past five years of escape from custody in violation of Minn. Stat. § 609.485
Have been committed to the commissioner custody for an offense that requires registration under Minn. Stat. § 243.166
Have a current arrest warrant or detainer, need to have resolved
Have fewer than 13 months remaining on their term of imprisonment
Have been placed in segregation or had disciplinary confinement time added to their term of imprisonment within 90 days
Currently have a suspended formal disciplinary sanction
Currently serving a sentence from another state or the United States
Currently serving a sentence that involved an upward dispositional departure
Meet any of the following mandatory intensive supervised release (ISR) criteria: 1. End of confinement review committee (ECRC) Level 3; 2. Minnesota Screening Tool Assessing Recidivism Risk (MNSTARR) non-sexual violent recidivism probability of 30% or higher; or 3. MNSTARR repeat sexual offense recidivism probability of 4.3% or higher.

Mental Health and Physical Health Eligibility:

All eligible CIP applicants must pass all mental health, physical health, and physical fitness screenings at MCF-Moose Lake or MCF-Shakopee prior to entry into CIP. Male applicants will be screened for stability of mental health and medical conditions prior to transfer to MCF-Moose Lake.

If you are interested and believe you meet the admission criteria and standards, please review the Phase 1 Program Agreement.

PLEASE KEEP THIS PAGE FOR YOUR RECORDS

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As authorized by Minn. Stat. §244.17, I, **Name:** _____ , **OID:**_____,
in consideration of being approved to participate in the Challenge Incarceration Program (CIP), agree to the following terms and conditions:

1. I understand that Phase I of CIP is a minimum of six months and contains a highly structured daily schedule and treatment-oriented program.

2. I accept transfer to any institution designated by the Commissioner of Corrections or designee as a CIP facility.

3. I agree to fully participate and successfully complete all program requirements and obey all the rules and regulations of the facility.

4. I will always follow the instructions of program staff.

5. I understand and agree that violation of any rules of the facility may result in termination of my CIP status and return to a Minnesota Correctional Facility (MCF).

6. I understand any refusal or inability to participate in programming as directed by the CIP staff, or any accumulation of minor program violations, may result in termination of my CIP status and return to an MCF.

7. I will submit to urinalysis and/or breathalyzer test as requested by the program staff.

8. I will not engage in assaultive or aggressive behavior, sexual behavior, sexual harassment, verbal abuse, violence, or threats of violence.

9. I understand that, while in CIP, I remain subject to the Department of Corrections Inmate Discipline Regulations for MCFs and pleading guilty to, or being found guilty of discipline, as outlined by the discipline regulations, may result in a violation of CIP Agreement.

10. I understand that those serving mandatory sentences must fulfil their full term of imprisonment prior to release from Phase III.

11. Are you a previous CIP Participant? (Please circle your answer) Yes No
    If yes, how many times and when?:_____

If you have read and understand the agreement, <u>you need to wait 60 days after Admittance/Voluntary termination/Revoke & Return from Phase I, II or III to apply for CIP.</u> Once you have reached your 60-day mark, fill out and return this signed application. **Upon receipt of your application your file will be reviewed within 60-90 days, and you will be notified of the decision by mail.**

I have read or had explained to me the above terms, conditions, and requirements for participation in CIP.

I understand that as a participant in CIP, I will not earn good time during Phases II and III of the program. I understand that if I am removed from the CIP, I will be returned to an MCF for a time equal to my original term of imprisonment, minus earned good time if any, but in no case for longer than the time remaining in my original sentence. "Original term of Imprisonment" means a time equal to two-thirds of the sentence originally executed by the sentencing court, minus jail credit, if any.

I further accept these conditions and terms, upon my participation in CIP is permitted and agree upon violation of any such terms and conditions the privilege to participate may be terminated.

I further understand that I am being granted CIP status based upon information available at the time of my approval. If information becomes available at any time during my participation in CIP, which would have made me ineligible, my CIP status may be terminated, and I may be returned to an MCF.

I understand that I will not be approved for Phase II of CIP until the CIP Program Director certifies that I have successfully completed Phase I of the CIP and the Hearings and Release Unit has approved Phase II status.

I fully understand and agree with the above paragraphs.

_____ Date: _____

CIP Applicant's Signature and OID #

Caseworker Name:_____ Facility:_____

Caseworker Signature: _____

To submit the program application and signed agreement, attach both forms to a kite and send to the records department at your facility.