CHALLENGE INCARCERATION PROGRAM RECYCLE AGREEMENT

I, Participant Name, OID#123456, do understand that if I choose to remain in and complete Phase I of the Challenge Incarceration Program, that I will do so under the following conditions:

- ❑ I will be placed in Squad Name. I understand that this will postpone my potential graduation date from Phase I of the Challenge Incarceration Program to approximately new squad end date.

- ❑ I understand that my Phase I status can be terminated for an accumulation of informal learning experiences which would demonstrate continued violation of minor rules.

- ❑ I understand that the Challenge Incarceration Program can seek the termination of my Phase I status should I plead guilty to or, through a Due Process Hearing, be found guilty of, violating any Department of Corrections discipline regulation.

Participant Signature: _____ Date: _____

Staff Signature: _____ Date: _____

Staff Printed Name: _____

Distribution: Incarcerated Person, ODocS