

1.5.F.3 Inmate Community Religious Activity Guidelines

I Policy Index:



Date Signed: **05/30/2019**
 Distribution: **Public**
 Replaces Policy: **N/A**
 Supersedes Policy Dated: **12/03/2018**
 Affected Units: **Adult Units**
 Effective Date: **05/30/2019**
 Scheduled Revision Date: **January 2020**
 Revision Number: **11**
 Office of Primary Responsibility: **DOC Administration**

II Policy:

Access to structured community religious and cultural activities and programming shall be used to support successful community reintegration of inmates. Approved inmates may be provided the opportunity to attend structured religious and cultural activities and programming in the community.

III Definitions:

Community Religious Host/Transporter:

For the purposes of this policy, a host/transporter is a person from the community who has been approved to transport an inmate to and from approved activities or assist the inmate in becoming involved in community religious and cultural activities and programming.

Inmate:

Any person sentenced or placed in a facility or program under the control of the Department of Corrections.

Work Release Program:

A program that allows approved inmates to be competitively employed in the community. The DOC shall promulgate rules necessary for placement, supervision and confinement of Work Release inmates and the administration of the program, pursuant to chapter 1-26.

IV Procedures:

1. Application Guidelines:

- A. Inmates approved for work release may attend structured religious and cultural activities or programming in the community (See DOC policy 1.5.A.5 [Work Release](#)).
- B. Work release inmates interested in attending religious or cultural activities or programming in the community must complete the *Community Religious or Cultural Activity or Programming Application* (See [Attachment 1](#)). The completed form must be submitted to the Cultural Activities Coordinator or designated staff member at least ten (10) working days prior to the scheduled date of the activity or programming.
 1. The Work Release Case Manager will be notified of all inmates approved to attend religious or cultural activities or programming in the community.

- C. Offenders released to Community Transition Program (CTP) who are level 2, may request permission from their supervising parole agent to attend religious or cultural activities or programming in the community (See DOC policy 1.5.G.2 [Parole Services-Community Transition Program](#)). The parole agent must ensure the inmate's curfew and access to the community is updated in the Comprehensive Offender Management System (COMS).
- D. Approved inmates or offenders are required to review and sign the *Community Activity Attendance Acknowledgement of Rules and Regulations* form (See [Attachment 2](#)). All rules regarding inmate conduct while participating in the Work Release Program or CTP Programming shall apply to inmate conduct while accessing the community for religious or cultural activities or programming.

2. Approved Religious Activities and Guidelines:

- A. The Cultural Activities Coordinator, designated institutional staff or parole agent (if a CTP offender) will review all community religious or cultural activities requested by an inmate/offender. Review shall include verifying the activity, location, time, length and level of supervision.
- B. An inmate's total time away from their assigned housing unit shall not exceed three (3) hours per activity or programming, including travel time.
 - 1. The total distance an inmate may travel from their assigned housing unit to attend an activity shall not exceed 25 miles, one way.
 - 2. Inmates may not travel outside the state of South Dakota.
- C. Work release inmates may attend a maximum of one activity or programming per week (Monday through Sunday), unless granted additional access by the Unit Manager, Associate Warden or Deputy Warden or Community Service Director. Parole agents shall determine CTP offender access to such activities or programming.
- D. Inmates/CTP offenders may wear civilian clothing while attending religious or cultural activities or programming in the community, unless otherwise restricted.

3. Community Religious Host/Transporter Application and Guidelines:

- A. Persons interested in becoming an approved community religious host/transporter must meet the following criteria:
 - 1. Must be 18 (eighteen) years of age or older and the same gender as the inmate they are transporting.
 - 2. May transport up to three (3) inmates to the same activity at one time. This requires prior approval by the Unit Manager and/or designated DOC staff.
 - 3. May charge inmates a transportation fee if licensed through the South Dakota Department of Revenue.
 - 4. Must complete the *Community Host/Transporter* application and attach a copy of their South Dakota driver's license and automobile insurance information (See [Attachment 3](#)).
 - 5. All hosts/transporters must complete the *DOC Access and Approval* form and return this to the DOC (See [Attachment 4](#)).

- a. A criminal background check (NCIC) will be completed on all host/transporters. The report shall be reviewed and approved by the senior security officer.
6. All hosts/transporters must review and sign the *Community Host/Transporter Rules* (See [Attachment 5](#)) prior to transporting inmates/offenders.
- B. Inmates/offenders may be required to sign-up for transport to and/or from the activity or programming. The sign-up may include the following information:
 1. Brief description of the activity or programming;
 2. Date, location, start and end time;
 3. Transportation details; and

4. Approved Public Transportation For Inmates:

- A. Work release inmates and CTP offenders may utilize public transportation or other means of self-transportation (walking or biking) to attend approved religious or cultural activities or programming in the community.

5. Termination:

- A. Inmate access to community religious or cultural activities or programming is a privilege and may be revoked at any time by the DOC. Nothing within this policy nor its application may be the basis for establishing a constitutionally protected liberty, property or due process interest in any inmate.
- B. Inmates are responsible for notifying staff if the activity or programming ends; or they will no longer attend the activity or programming. Staff approval for the inmate to access the community for religious or cultural activities or programming is non-transferable and may not be utilized to facilitate access to the community for unspecified reasons.
- C. The inmate's case manager or parole agent (CTP offender) will be notified if an inmate/offender's access to the community for religious or cultural activities or programming is revoked/terminated.
- D. A community host/transporter's access to inmates/offenders may be terminated by the DOC at any time with or without cause.

V Related Directives:

SDCL § [24-8-1](#).

DOC policy 1.5.A.5 -- [Work Release](#)

DOC policy 1.5.G.2 -- [Community Transition Program](#)

VI Revision Log:

June 2010: New policy.

January 2011: **Added** ss 1. A. "may attend approved religious activities in the community" Added hyperlink to DOC Work Release policy. **Replaced** ss 1 B. "participate in" with "utilize". **Deleted** D. in ss 1. **Deleted** "appropriate" in ss D. 1. and renumbered to C. 2. **Deleted** from ss 2 a. "the following community" **Added** "These activities are subject to review and approval by DOC staff. Activities include but are not limited to the following:" Deleted 4. a. b. c. d. & f. from ss 2 in A. Renumbered "weddings" (4) and "other events" (5). Inserted "age 18 (eighteen) or older and" in ss 3 A. 1. **Added** "or transport the inmate outside of the state of South Dakota" to ss 3, A. 2. **Deleted** 5. from ss 3. **Replaced** with "Hosts/transporters who charge inmates for

transportation expenses must be licensed through the Department of Revenue". **Added** "Inmates" to 7. in ss 3. **Replaced** 7. a. in ss 3. With "A criminal background check will be completed on all hosts/transporters and be approved by the senior security officer". **Replaced** "The denomination" with "Brief description in ss 3 B. 1. **Deleted** 2. from ss 3 B. **Added** "start and end time" and "location" and replaced "at one time" with "per trip" in the newly re-numbered B.2 in ss 3. **Deleted** ss 4. A. "All inmates who have been approved to utilize public transportation to a community religious activity must have an approved religious host at the religious event and **Replaced** ss 4. A. with "CTP inmates and inmates approved for work release may utilize public transportation to attend approved religious activities or other means of self- transportation as approved by DOC staff." Attachment 2. **Added** "all DOC" to agreement statement. **Added** 1. "except in the case of an emergency to contact the DOC". **Deleted** "arrived at the approved community religious activity" from 5. and **Replaced** with "departed from the facility". **Deleted** "with any member associated with the community religious activity" in 7. and **Replaced** with "or engage in inappropriate relations with other inmates attending the activity, the transporter or others attending the activity". **Added** 8. "except those tobacco products approved for use during cultural/religious activities. **Added** "or other inmates attending the activity" to 11. **Deleted** 20. "I will only wear the state approved clothing and shoes while participating in community religious activities". Attachment 5. **Added** 1. "other than those tobacco products approved and used in conjunction with religious/cultural activities" **Added** "except in the case of an emergency or to contact the DOC and **Deleted** "at community religious activities from 3. **Replaced** "visitors" with "friends or family members" and replaced "activities other than religious services" with "social or romantic relations with boy/girl friends, spouses or partners". **Deleted** 6. "All religious hosts/transporters must take part in DOC specified training prior to inmate transports and annually thereafter". **Deleted** 7. Religious hosts/transporters must know where inmates are at all times". **Deleted** 8. "A religious host/transporter will not be sexually involved with an inmate". In 7. **Replaced** "drink" with "beverages (absolutely no alcohol)". **Added** "please call 911" to 9. **Added** "or violating any of the rules or conditions contained in this document" to 10. **Deleted** "arrived at the community religious activity in 12. **Replaced** with "when they departed from the facility". **Added** "or other communication devices" to 14. **Deleted** 19." An inmate will only wear the approved personal clothing to community religious activities".

October 2011: **Added** definition of "Work Release". **Deleted** 2. "The approval for CTP parolees to participate in community religious activities is subject to their respective agent". in Section 1 A. **Deleted** "3. CTP parolees approved to participate in community religious activities may utilize the same transportation arrangements offered to inmates on work release". in Section 1. A. **Added** "and submit the application to their respective DOC Cultural Activities Coordinator ten (10) working days prior to the date of the requested activity". in Section 1 B. **Added** "by the Cultural Activities Coordinator" and "through their DOC Work Release Case Manager" to Section 1 C. **Deleted** "1. Approved CTP parolees are not required to complete the Community Religious Attendance application of the Community Religious Attendance Acknowledgement of Rules and Regulations". in Section 1 C. **Deleted** "2. Inmates attending religious activities in the community will be allowed to wear civilian clothing to religious activities". in Section 1 C. **Added** "and Guidelines" to title of Section 2. **Deleted** "but are not limited to the following:" and **Replaced** with "organized religious events at an approved house of worship and other events as approved" in Section 2. A. **Deleted** criteria 1-5. **Added** B. "Time away from the unit for an approved religious activity is not to exceed three (3) hours including travel to and from the activity". in Section 2. **Added** C. "A maximum of one community religious activity per work (Monday through Sunday) per inmate may be approved". in Section 2 **Added** "Inmates attending religious activities in the community will be allowed to wear civilian clothing to religious activities". in Section 2. **Deleted** "3. Will not be allowed to select a specific inmate to transport/host". in Section 3. **Deleted** a. "Unless the interested person is a family member or friend previously on the inmate's visit list and wishes to volunteer as a community religious transporter/host" in Section 3. **Deleted** "not host" and "more than" and **Replaced** with "up to" **Added** "with prior approval in Section 3 A. 4. **Deleted** "cultural activities coordinator" and **Replaced** with "Work Release Case Manager" in Section 3 A.7. **Deleted** "8. Participate in required training set forth by DOC". in Section 3 A. **Deleted** a. Community religious transporters/hosts who are transporting/hosting CTP inmates are not required to complete the Community Religious Host/Transporter, Community Religious Host/Transporter Background Check and Release and Waiver of Liability of the Community Religious Host/Transporter Rules" in Section 3 A. 9. **Deleted** "CTP inmates and inmates approved for" and **Added** "examples include walking and biking" to Section 4. A.

March 2012: **Reviewed with no changes.**

January 2012: **Added** "approved for" and **Deleted** "and will be informed of the community religious program" in Section 1 A. **Added** the Cultural Coordinator or designated DOC staff" to Section 2 A. and 2 A. 1 **Added** "without prior approval from the unit manager and Deputy/Associate Warden" in Section 2 B. **Added** 1 & 2 to

Section 2 B. **Deleted** "DOC staff" and replaced with "unit manager" in Section 3 A. 3. **Added** "unit manager" to Section 4 A.

February 2014: **Reviewed** with no changes.

February 2015: Grammar and sentence structure changes.

February 2016: **Reviewed** with no changes.

February 2017: **Reviewed** with no changes.

March 2018: **Added** "This shall include verifying the validity of the activity, location, time, length and level of supervision provided" in Section 2 A.

May 2019: **Added** All rules regarding inmate conduct while participating in the Work Release Program or CTP Programming shall apply to inmate conduct while accessing the community for religious or cultural activities or programming in Section 1 C. **Added** Section 5. **Revisions** to Attachments 1-3.

Mike Leidholt (original signature on file)

Mike Leidholt, Secretary of Corrections

05/30/2019

Date

Attachment 1: Community Religious or Cultural Activity or Programming Application

The *Community Religious or Cultural Activity or Programming Application* is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\Community Religious or Cultural Activity or Programming application.doc>

South Dakota Department of Corrections Policy Distribution: Public	Attachment: Application Please refer to DOC policy 1.5.F.3 Inmate Community Religious Activity Guidelines
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COMMUNITY RELIGIOUS OR CULTURAL ACTIVITY OR PROGRAMMING APPLICATION

Name: _____ Number: _____

Did you attend religious activities in the community? Yes No
Do you attend religious activities in prison? Yes No

What is your religion/denomination? _____

List the activity or programming you are requesting to attend and the complete address/location of the activity.

Activity _____ Address/Location _____

Will someone transport you to the activity or programming? Yes No

Name: _____ Phone #: _____
Street: _____ City: _____ Zip Code: _____

By my signature below, on behalf of myself, my heirs, next of kin, successors in interest, personal representatives and agents, I hereby waive any claim of cause of action against and release from liability the State of South Dakota, its officers, employees and agents from any liability for injuries to my person or property resulting in my attending activities in the community and agree to indemnify and hold harmless the State of South Dakota, its officers, employees and agents for any claims, cause of action or liability to any other person arising from my attending activities in the community.

I understand by my signature below I have given up substantial rights and have signed freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability.

Inmate's Signature

Date

FOR ADMINISTRATION USE ONLY	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ Staff Printed Name and Signature	_____ Date

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Attachment 2: Community Activity Attendance Acknowledgement of Rules and Regulations

The **Community Religious Attendance Acknowledgement of Rules and Regulations** is located at: <M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\Community Activity Acknowledgement of Rules and Regulations.doc>

South Dakota Department of Corrections Policy Distribution: Public	Attachment: Community Activity Acknowledgement of Rules & Regulations Please refer to DOC policy 1.5.F.3 Inmate Community Religious Activity Guidelines
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COMMUNITY ACTIVITY ACKNOWLEDGEMENT OF RULES AND REGULATIONS

I, _____ the undersigned do hereby agree to abide by all DOC rules and regulations pertaining to attending activities in the community.

1. I will be on time and ready for transport.
2. I will travel directly to and from the location of the activity or programming.
3. I understand I will not be permitted to use the telephone except in the case of an emergency or to contact the DOC. I will not possess a cell phone.
4. I understand I am not allowed to transport items/property to or from the activity or programming.
5. I will not operate a motor vehicle.
6. I will not engage in inappropriate relations with other inmates attending the activity, the host/transporter or others.
7. I will not use or possess any alcoholic beverage, drugs, or tobacco products.
8. I will not involve myself in any financial dealings.
9. I will not use the privilege of attending activities or programming in the community to meet visitors.
10. I will not engage in sexual activity.
11. I understand my person, possessions and living quarters is subject to search.
12. I understand I will be held responsible for any contraband found on my person, in my possession and/or in my living quarters.
13. I will not use/operate any computer while in the community.

I have read, understand, and agree to the above rules and regulations.

Inmate Signature _____ _____ _____
Number Date Witness

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Attachment 3: Community Host/Transporter

The **Community Host/Transporter** application is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\Community Religious Host-Transporter.doc>

South Dakota Department of Corrections Policy Distribution: Public	Attachment: Community Religious Host/Transporter Please refer to DOC policy 1.5.F.3 Community Religious Activity Guidelines
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COMMUNITY HOST/TRANSPORTER
Please Complete Sections A, B and C and turn into the respective Institution's Cultural Activities Coordinator

Date: _____

A.

Pastor/Priest: _____ Church Name: _____

Address: _____

City/State/Zip: _____ Telephone #: _____

B.

Host/Transport's Name: _____

Address _____ Phone #: _____
Street Address City State Zip Code

Date of Birth: _____ Soc. Sec. #: _____ Driver License #/State: _____

Are you on any Inmate Visit List? Yes No If yes, Inmate Name: _____

Transport Arrangements: Public Transportation Transporter _____
Full Name of Transporter

Name of Auto Insurance Carrier: _____
** A copy of proof of driver license and insurance is required, if private transporter. Attach both documents to this form.

C. COMMUNITY TRANSPORTER (Not Applicable, if using public transportation)

I, _____ agree to transport Inmate: _____

to and from approved community activities. I certify I have a valid driver's license. I agree to transport inmates/offenders directly to and from the approved activities without any unauthorized stops. I understand inmates/offenders have limited access to the community. I understand it is my responsibility to come into the unit and identify myself when I pick or drop off inmate/offenders at the facility.

Community Host/Transporter /Signature _____
Date

D. For DOC Staff Use Only

Background Check Completed: Yes No

Driver License Verified: Yes No Date: _____ Staff: _____

Training Completed: Yes No Training Date: _____

Forms Attached: Copy of Background Check: Yes No Copy of Driver License: Yes No ← N/A if not transporting → Copy of Insurance: Yes No

Unit Staff Member Signature: _____

*NOTE: A separate form is required for each person who will be hosting and/or transporting inmates.

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Attachment 4: DOC Access Approval form

The DOC Access Approval form is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\DOC ACCESS APPROVAL FORM.doc>

<div style="font-size: small; margin-bottom: 10px;"> South Dakota Department of Corrections Policy Distribution: Public </div> <div style="text-align: right; font-size: x-small; margin-bottom: 10px;"> Attachment: DOC Access Approval Please refer to DOC policy 1.1.A.4 / 1.1.D.3 / 1.5.A.6 Relationship w/News Media... / Facility Access & ID Requirements / Community Service Program </div> <h3 style="text-align: center; margin: 0;">Background Check Authorization</h3> <p>CHECK ONE: <input checked="" type="checkbox"/> M-2 <input type="checkbox"/> W-2 <input type="checkbox"/> Volunteer <input type="checkbox"/> Special Event Visitor <input type="checkbox"/> Clergy <input type="checkbox"/> Vendor/Contractor <input type="checkbox"/> Tour <input type="checkbox"/> Other</p> <p> Last Name _____ First Name _____ MI _____ Social Security Number _____ Maiden /Alias Names: _____ Street Address/P.O. Box _____ City _____ State _____ Zip Code _____ Home Telephone Number _____ Work Telephone Number _____ Cell Phone Number (optional) _____ Date of Birth _____ Driver's License Number # _____ State Issuing Driver's License _____ </p> <p style="font-size: x-small;">I hereby authorize the South Dakota Department of Corrections, or its designated agents and representatives to obtain and review my criminal background. I certify that the information given by me is true, complete and correct, to the best of my knowledge and belief and made in good faith.</p> <p style="font-size: x-small;">The DOC and its designated agents or representatives shall maintain all information received from this authorization in a confidential manner in order to protect the my personal information, including, but not limited to, addresses, social security numbers and dates of birth.</p> <p> Signature of Applicant _____ Date _____ Staff Signature _____ Date _____ Printed Name _____ Printed Name _____ </p> <div style="border: 1px solid black; padding: 2px; font-size: x-small; margin-top: 10px;"> FOR OFFICE USE ONLY: Background Check Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Printouts) Special Security/Major Signature Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Deputy Warden/Designee Signature _____ Date _____ </div> <div style="font-size: x-small; margin-top: 10px;"> Revised: 03/13/2017 Page 1 of 2 </div>	<div style="font-size: small; margin-bottom: 10px;"> South Dakota Department of Corrections Policy Distribution: Public </div> <div style="text-align: right; font-size: x-small; margin-bottom: 10px;"> Attachment: DOC Release and Waiver of Liability Please refer to DOC policy 1.1.A.4 / 1.1.D.3 / 1.5.A.6 Relationship w/News Media... / Facility Access & ID Requirements / Community Service Program </div> <h3 style="text-align: center; margin: 0;">DOC RELEASE AND WAIVER OF LIABILITY</h3> <p>By my signature below, I acknowledge that I am aware of, appreciate the character of, and voluntarily assume the risks associated with being on DOC property, or participating in DOC activities within the following facilities:</p> <p style="text-align: center; border: 1px solid black; padding: 2px; font-size: x-small;"> South Dakota State Penitentiary, Jameson Prison Annex, Mike Durfee State Prison, Yankton Community Work Center, Rapid City Community Work Center, South Dakota Women's Prison or Pierre Community Work Center </p> <p>I understand that risks associated with such entry and/or participation in DOC activities include, but are not limited to, bodily injury, property loss or damage and death.</p> <p>By my signature below, on behalf of myself, my heirs, next of kin, successors in interest, assigns, personal representatives, and agents, I hereby:</p> <ol style="list-style-type: none"> 1. Waive any claim or cause of action against and release from liability the State of South Dakota, its officers, employees, and agents for any liability for injuries to my person or property resulting from such entry and/or participation in DOC activities; 2. Agree to indemnify and hold harmless the State of South Dakota, its officers, employees, and agents for any claims, causes of action, demands, expenses, judgments, fees and costs of whatever kind or character arising from, by reason of, or in connection with my entry to a DOC facility or participation in DOC activities. <p style="font-size: x-small;">I have carefully read this RELEASE AND INDEMNITY AGREEMENT, or had it read to me in a language I fully understand, and I understand all of the terms. I understand I have given up substantial rights by signing this agreement and that it is the intention of the parties that the State and its officers, agents and employees shall not be liable or in any way responsible for injury, damage, liability, loss or expense resulting to me due to accidents, mishaps, misconduct, negligence or injuries. My signature below has been made freely and voluntarily without any inducement, assurance or guarantee being made.</p> <p> Name: _____ Date of Birth: _____ Signature: _____ Address: _____ Date: _____ </p> <div style="font-size: x-small; margin-top: 10px;"> Revised: 03/13/2017 Page 2 of 2 </div>
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Attachment 5: Community Religious Host/Transporter Rules

The **Community Religious Host/Transporter Rules** is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\Community Religious Host-Transporter Rules.doc>

<p>South Dakota Department of Corrections Policy Distribution: Public</p>	<p>Attachment: Community Religious Host/Transporter Rules Please refer to DOC policy 1.5.F.3 Community Religious Activity Guidelines</p>	<p>South Dakota Department of Corrections Policy Distribution: Public</p>	<p>Attachment: Community Religious Host/Transporter Rules Please refer to DOC policy 1.5.F.3 Community Religious Activity Guidelines</p>
<p>Community Host/Transporter Rules</p>		<p>14. An inmate, an inmate's possessions and an inmate's living quarters are subject to search at any time by DOC staff.</p>	
<p>1. Hosts/transporters are required to remain at the activity with the inmate(s) they are approved to transport.</p> <p>2. Alcoholic beverages, illegal drugs or tobacco products will not be made available to inmates.</p> <p>3. Inmates will not operate motor vehicles.</p> <p>4. Inmates are not allowed to use telephones, except in the case of an emergency or to contact the DOC. Inmates may not possess cell phones.</p> <p>5. Community activities are not a time or place for inmates to receive or interact with visitors other than the approved transporter/host and persons on their approved visit list and who are regular attendees of the activity. Inmates are not to use the privilege of attending community activities to meet friends or family members who are not regular attendees of the activity or to engage in social or romantic relations with boy/girl friends, spouses or partners. Sexual activity is specifically prohibited.</p> <p>6. No host/transporter may perform personal favors for inmates (mail letters or packages, arrange phone calls, make unauthorized articles available to inmates).</p> <p>7. No host/transporter may participate in any type of financial dealing with inmates; including but not limited to, lending, borrowing or giving money to an inmate or purchasing or selling items for inmates.</p> <p>8. Inmates may share in food and beverages (absolutely no alcohol) offered or provided at the community activity; provided the food and beverages are available as part of the service, event or activity.</p> <p>9. An activity schedule will be provided to the institution staff by the host/transporter and shall include the number of inmates who may sign up for the activity and transportation to the event.</p> <p>10. In case of a medical emergency involving an inmate, please call 911. Inmates should be transported to the nearest medical treatment facility. The facility where the inmate is housed must be notified as soon as possible.</p> <p>11. Misconduct by inmates will not be tolerated and must be reported immediately to the institution; (arguing, refusing to cooperate or violating any of the rules or conditions described herein).</p> <p>12. Walk-aways must be reported immediately to the institution. A host/transporter should not attempt to restrain or stop an inmate who attempts to leave a community religious event. If you notice an inmate is missing, or you suspect the inmate has left the activity without your knowledge, contact the DOC institution where the inmate is housed immediately.</p> <p>13. Inmates are not allowed to bring anything back to their housing unit expect the items they had when they departed from the facility.</p>		<p>15. Inmates will not utilize computers, electronic messaging, or other communication devices while in the community.</p> <p>16. Hosts/transporters are responsible for reporting any accident, incident, or unsafe condition involving an inmate that occurs while the inmate is in the community or attending the religious activity to facility staff.</p>	
<p>Revised: 02/12/2015 Page 1 of 2</p>		<p>For clarification regarding the rules or policies pertaining to inmates or the community activity program, or to report inmate misconduct or a medical emergency, please contact the facility where the inmate(s) is housed.</p> <p>SD State Penitentiary (Sioux Falls, SD) Control Room 367-5120 or 367-5121 or 367-5122 SD Women's Prison Control Room 773-5368 Mike Durfee State Prison Control Room 369-2201</p> <p>I attest I have read and understand the above stated rules and conditions and have participated in any training required of me to be a host/transporter, as prescribed by the DOC. I will enforce to the best of my ability the rules set forth by the DOC as they relate to inmates participating in community religious activities.</p> <p>Name of church/religious activity: _____</p> <p>Location of activity: _____</p> <p>Signature of host/transporter: _____</p> <p>Revised: 02/12/2015 Page 2 of 2</p>	