



# MANITOWOC COUNTY SHERIFF'S OFFICE

1025 South 9th Street • Manitowoc, Wisconsin 54220

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*Sheriff - Robert C. Hermann*

*Inspector - Gregg J. Schetter*

Please review this packet. It contains information that you will need to know about serving your jail sentence. Once you have completed reviewing the information, call the Huber Sgt. to schedule an appointment to go over information about your jail stay.

This is very important for work release, self-employment, and childcare release.

If you are currently unemployed and seeking work, complete the General Employment Application and review the Work Search section of this packet.

Register with temporary employment agencies prior to reporting to jail.

If you would like to transfer your sentence to another jail, call the Huber Sgt. for the transfer process to begin.

Huber Sgt Phone # (920)-683-4945

If your jail sentence is a result of an OWI charge, you must have your alcohol assessment scheduled and paid for prior to reporting into jail or you will not have Huber privileges. This is not a jail rule, it is a state law!

## **JAIL HEALTH SERVICES UNIT INFORMATION**

\*The Jail Health Services Unit (HSU) personnel will follow HIPAA regulations related to disclosure of medical or dental information to persons other than the inmate. Information will be disclosed as needed to medical facilities for continuation of medical care.

\*Inmates are responsible for directing and addressing all medical or dental concerns to the Health Services Unit.

\*It is recommended you complete a medical information release sheet prior to your report in date so jail nursing can review and retrieve any medication or medical records needed prior to your report in date.

\*Narcotic and/or sleep aid medications are **not** allowed unless approval is granted by a jail medical provider or prescriber. This includes, but is not limited to, methadone and suboxone. Non-narcotic medications should be used whenever possible as an alternative.

\*All prescription medications must be brought to the jail in the original, pharmacy container. Prescriptions must be current and properly labeled. Multiple medications combined in one container are **not** allowed. Jail medical staff will review the prescriptions and the jail medical director will be the responsible physician in charge of your care while incarcerated in our facility.

\*Over-the-counter medications are **not** allowed to be brought in. These items may be purchased from the canteen. Diabetics are responsible to provide verification from a doctor their care instructions. This can be done prior to your report in date. All diabetics will use the jail diabetic supplies. This includes testing meter, strips, syringes, insulin, alcohol preps and lancets.

\*Diet modifications are approved only with verification from a doctor. The doctor's contact information must be provided to the HSU for verification and medical information release. This can be done prior to your report in date.

TIME OUT : \_\_\_\_\_

UA \_\_\_\_\_

■ INMATE NAME: \_\_\_\_\_ LOCKER# \_\_\_\_\_

**MANITOWOC COUNTY JAIL HUBER/WORK RELEASE INFORMATION**

■ EMPLOYER/SCHOOL/ETC: \_\_\_\_\_

■ ADDRESS: \_\_\_\_\_ ■ PHONE#: \_\_\_\_\_

■ SUPERVISOR: \_\_\_\_\_

INFORMATION REC'D BY: \_\_\_\_\_ CONFIRMED: \_\_\_\_\_

CHECK RELEASE: \_\_\_\_\_ PREPAY: \$ \_\_\_\_\_ OTHER: \_\_\_\_\_

DAYS OUT OF JAIL BASED ON MONTHLY SCHEDULE WHEN FAXED IN

**METHOD OF TRANSPORTATION**

10/27 10/28 \_\_\_\_\_

WALK \_\_\_ AUTO \_\_\_ BUS \_\_\_ BICYCLE \_\_\_ TAXI \_\_\_\_\_

■ PERSON TRANSPORTING: \_\_\_\_\_

■ ADDRESS/PHONE#: \_\_\_\_\_

■ DESCRIPTION OF VEHICLE: \_\_\_\_\_

■ LICENSE PLATE #: \_\_\_\_\_

■ INSURANCE COMPANY/EXPIRATION DATE: \_\_\_\_\_

■ ROUTE TO AND RETURN (THE JAIL IS LOCATED ON 1025 S 9<sup>TH</sup> ST  
ROUTE TO START FROM THAT POINT): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INMATE SIGNATURE: \_\_\_\_\_

WITNESS: \_\_\_\_\_ DATE: \_\_\_\_\_

(■ -FILL IN THESE PRIOR TO BOOKING IF NOT BOXED ARE FOR STAFF USE).



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Employers of inmates at the Manitowoc County Jail will need to complete this form and fax it to the jail (fax #920-683-5169). If you do not have a fax available, please have the inmate hand deliver the form to the 2<sup>nd</sup> floor jail staff. If you don't know their schedule for the month, then send in what you know weekly. The form needs to be in by midnight on the Saturday prior to the start of each week. **NOTE: If we do not receive this completed form by midnight on the Saturday prior to the start of that work week, the inmate will not be scheduled or sent out to work until we receive this form.** If the inmate is providing childcare for your employee, please include the inmate's name next to your employee's name on the line provided below.

Thank you for your cooperation.

Sgt. Mary Reel  
Huber Sergeant

Deputy Inspector Jason Jost  
Jail Administrator

Inmate Name: \_\_\_\_\_

Employer: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WORK

ELECTRONIC MONITORING (EMP)

CHILDCARE

## MONTH OF \_\_\_\_\_

DAY	HOURS	DAY	HOURS
1		16	
2		17	
3		18	
4		19	
5		20	
6		21	
7		22	
8		23	
9		24	
10		25	
11		26	
12		27	
13		28	
14		29	
15		30	
		31	

If you have any questions or changes to the schedule, please call the Manitowoc County Jail Huber Division at 920-683-4944 or fax to 920-683-5169

(Staff Use: Events scheduled by: \_\_\_\_\_)

# General Employment Application

Applicant Information									
Full Name:				Date:					
Last			First			M.I.			
Address:									
Street Address						Apartment/Unit #			
City						State		ZIP Code	
Phone: (    )		E-mail Address:							
Date Available:			Desired Salary:			\$			
Position Applied for:									
Are you a citizen of the United States?			YES	NO	If no, are you authorized to work in the U.S.?			YES	NO
Have you ever worked for this company?			YES	NO	If yes, when?				
Have you ever been convicted of a felony?			YES	NO					
If yes, explain:									

Education									
High School:			Address:						
From:	To:	Did you graduate?		YES	NO	Degree:			
College:			Address:						
From:	To:	Did you graduate?		YES	NO	Degree:			
Other:			Address:						
From:	To:	Did you graduate?		YES	NO	Degree:			

References									
<i>Please list three professional references.</i>									
Full Name:				Relationship:					
Company:				Phone: (    )					
Address:									
Full Name:				Relationship:					
Company:				Phone: (    )					
Address:									
Full Name:				Relationship:					
Company:				Phone: (    )					
Address:									

### Previous Employment

<b>Company:</b>		Phone:	(      )
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:		To:	Reason for Leaving:

<b>Company:</b>		Phone:	(      )
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:		To:	Reason for Leaving:

<b>Company:</b>		Phone:	(      )
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:		To:	Reason for Leaving:

<b>Company:</b>		Phone:	(      )
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:		To:	Reason for Leaving:

### Military Service

Branch:		From:		To:	
Rank at Discharge:		Type of Discharge:			
If other than honorable, explain:					

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature:		Date:	
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Resume attached	YES	NO
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# RULES FOR INMATES LEAVING THE JAIL

- \_\_\_\_\_ 1. You may not deviate from your assigned route, change your method of transportation, or leave your authorized destination without prior consent from jail staff.
- \_\_\_\_\_ 2. You may not have contact with, walk with, or visit with unauthorized persons while away from the jail.
- \_\_\_\_\_ 3. You have been authorized to be away from the jail during specified times. Any changes or modifications of hours and/or days must be reported to the jail staff **by your employer, school staff, etc., prior to that change being made.**
- \_\_\_\_\_ 4. You may not make unauthorized phone calls, computer emails, or any other forms of unauthorized communication while away from the jail.
- \_\_\_\_\_ 5. You may not use controlled substances or products containing alcohol.
- \_\_\_\_\_ 6. You, your property, your locker, etc., are subject to search while you are an inmate of the jail. This includes any locker, etc., at your job site.
- \_\_\_\_\_ 7. All monies received by you while an inmate of the county jail shall be sent or presented to the jail staff for distribution according to Wisconsin Statue 303.08.
- \_\_\_\_\_ 8. You are allowed out 72 hours per week **including your travel time.** The maximum time out in any one day is 12 hours.
- \_\_\_\_\_ 9. You are allowed out 6 days in a row and under the 72 hour total. After 6 days out you must sit in one complete day.
- \_\_\_\_\_ 10. You need to fill out a **Huber Work Site Log** form if your place of employment varies. This form must be filled out **prior to being let out for work each day.**

I UNDERSTAND THE ABOVE RULES. I UNDERSTAND THAT ANY VIOLATION OF THESE RULES, OR ANY OTHER JAIL RULE, WILL RESULT IN DISCIPLINE WHICH COULD RESULT IN MY HUBER/WORK RELEASE PRIVILEGES TO BE REVOKED.

INMATE  
SIGNATURE: \_\_\_\_\_

JAIL STAFF: \_\_\_\_\_  
DATE: \_\_\_\_\_

# Manitowoc County Jail Visitation Authorization

**INMATE NAME:** \_\_\_\_\_ **CELL:** \_\_\_\_\_

**All visitors** must be approved by jail staff prior to visit. You may have unlimited immediate family visitors approved to visit. Immediate family includes father, mother, step-father, step-mother, brother, sister, spouse, grandparents and your children. You may have up to 4 non-immediate family visitors approved to visit. Visitors under the age of 18 will only be allowed to visit if they are immediate family to the inmate. All visitors under the age of 18 must be accompanied by *their* parent or legal guardian. The parent or guardian must be present in the visitation room. **Children must be supervised at all times. All visitors must be at the jail at least 15 minutes prior to your scheduled visitation time. If they are not at the jail 15 minutes prior, they will not be allowed to visit. Visitors must show photo ID every visit.**

**You will not be allowed to change your non-family visitors once they are approved. This will be for the length of your incarceration. All blanks must be completely filled in.**

**#1** \_\_\_\_\_  
Last Name First Name Middle Name  
DOB: \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip Code \_\_\_\_\_  
Sex \_\_\_\_\_ Race \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_  
Relationship: \_\_\_\_\_

**#2** \_\_\_\_\_  
Last Name First Name Middle Name  
DOB: \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip Code \_\_\_\_\_  
Sex \_\_\_\_\_ Race \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_  
Relationship: \_\_\_\_\_

**#3** \_\_\_\_\_  
Last Name First Name Middle Name  
DOB: \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip Code \_\_\_\_\_  
Sex \_\_\_\_\_ Race \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_  
Relationship: \_\_\_\_\_

**#4** \_\_\_\_\_  
Last Name First Name Middle Name  
DOB: \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip Code \_\_\_\_\_  
Sex \_\_\_\_\_ Race \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_  
Relationship: \_\_\_\_\_

*Staff notes:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Entered:** \_\_\_\_\_

**Informed:** \_\_\_\_\_

**THE FOLLOWING INFORMATION REGARDING HUBER LAW/WORK  
RELEASE IS TAKEN FROM THE INMATE HANDBOOK**

**MANITOWOC COUNTY JAIL HUBER RULES**

In accordance with Wisconsin State Statute 303.08(1), the Court has granted you the privilege to work, seek employment, to attend to the needs of family members and/or attend school or treatment programs, if approved/verified by the Jail facility.

**Huber law is a privilege, NOT A RIGHT**

**General Huber Rules**

- All Huber/work release inmates are subject to all general jail rules as well as the following Huber release rules:
- You will not be released for work, childcare, or appointments unless your bed is made and the cellblock is cleaned. You must do your fair share of the cleaning of the cellblock.
- You will be required to submit to a drug test. This will be done prior to your being released for work. Drug tests may be required from you at any time, at the staff's discretion.
- You are required to leave all work/street clothing in your assigned locker and change into a jail uniform. All items, including clothes, shoes, money, etc. will be placed in your locker. A lock is supplied for your locker by the jail. You are responsible for securing your own locker. **The jail or the jail staff is not responsible for items missing from the lockers.** It is **not recommended** that you keep valuable items in your locker.
- If you need to have your personal laundry washed, write your name on the list provided in hallway. You will be notified when it is your turn for laundry.
- You are not allowed to hide items outside on county property.
- When you are released to attend appointments, you are issued an activity sheet. It is your responsibility to have your activity sheet filled out completely.

**Work**

**Board/Transfer Fee**

As a Huber inmate, you will be required to pay a rate to cover expenses incurred by the county. When booked into the jail you will be charged a \$25.00 booking fee. Inmates wishing to transfer to another county, as authorized by the Courts, or transfer to Manitowoc County to serve their sentence will be assessed a \$100.00 transfer fee which also covers the \$25.00 booking fee. This fee must be paid prior to scheduled report in date, along with any past-due debt to the County.

- The current board rate for sentenced inmates is \$18.00 per day (this includes state tax).
- Electronic Monitoring Board rate is \$25.00 per day with a \$50.00 start-up fee.
- Rates for board are subject to change.

If you are being held on a probation violation and are pending revocation, you will be required to pay the per diem fees for the days you receive credit on your case. You will be back-billed \$18.00 per day for every day you received credit for time spent in the Manitowoc County Jail after January 1st, 2002.

If the sentence you are serving is less than 20 days, you will be required to pay the board for that time in full prior to going out to work plus any past due booking and board fees.

If the sentence you are serving is 30 days or more, per Wisconsin Statute 303.08(4), you will be required to turn over all wages earned to the Manitowoc County Jail. A check release authorization form will be sent to your employer prior to being released for work unless your Huber is paid in full.

All monies received will be placed into the jail account in your name. Upon a written request, you will be allowed to have money disbursed from your account to pay for support, bills, restitution, etc. You are limited to three disbursements per week. Any subsequent disbursements will be charged a \$3.00 surcharge fee. You may be allowed to have up to \$50.00

dollars per week for personal expenses, depending on your mode and distance of transportation. Exceptions may be granted upon a written request. All checks for miscellaneous bills will be made out on Thursdays by the bookkeeper; all checks for personal matters (milk money) will be made out on Fridays. An addressed stamped envelope must accompany all money requests for bills, unless you specify that someone with I.D. will come to the jail and pick up the check.

You should have a request slip filled out by Thursday to receive milk money, gas money, etc.

## **Self Employment**

If you are self employed, you will be required to furnish a federal tax number and a copy of the Wisconsin Sellers Permit from the Wisconsin Department of Revenue showing your name or the name of the business you have the permit in.

All self employed Huber inmates will be required to pay their board two (2) weeks in advance and keep it current. Failure to do so will result in you being held in from work until the requirement is met.

You will be required to provide a written schedule **each** day for your activities. This schedule must include the address of the work site, phone number at the work site and the times you will be at the work site. If your work location changes while out at work, you must provide the updated information prior to changing locations. If it changes daily, it will be provided to staff, in writing daily prior to leaving for work. **Failure to provide staff with a written schedule will result in you being held in from work and/or childcare.**

Self-employed inmates will not be allowed to work holidays.

Self-employed inmates will be required to provide the jail with proof of injury/accident insurance.

Your 12 hours out will start when you are logged out and will end when you are logged back in.

## **Childcare/Family Care**

The Manitowoc County Jail staff will regulate the hours you will be permitted for child care. This includes holidays.

Child care must be authorized by the Huber officer and will only be allowed for the inmate's own children. You must provide the names of your children that you will be caring for, as well as a copy of the birth certificate of each child. In a divorce situation, you must show proof that you are the custodial parent or legal guardian.

A special childcare/ family care form must be completed and signed before authorization is given to perform the service. This form allows the Huber officer or representative to enter the residence where childcare is being done.

If you are providing care for an adult (immediate family only), you must provide medical documentation that the family member is unable to care for him/herself.

The time of the childcare will be the hours you are needed when the other childcare person is at work. The employer must complete a "Inmate Weekly Schedule" Form.

If you are working and doing childcare, the hours for the two will be added together.

Childcare will be restricted to a single residence. You must provide a contact phone number.

Huber release rules apply at all times.

## **Travel**

You are required to furnish your own transportation to and from work. All persons transporting you (including yourself) must show proof of insurance and have a valid driver's license. This must and will be done prior to you utilizing this mode of transportation.

Release times for work are on the hour, 15, 30 and 45 minutes past the hour. Jail staff will determine travel time.

When you leave the jail to go to work, you are to go directly to your place of employment and return directly to the jail when you are finished with work. Unless you have permission from a jail officer, do not stop anywhere on the way to or from work. Work sites may be visited or called by jail staff or other law enforcement officers.

You are not allowed to meet with your spouse, girlfriend, boyfriend, or other friends or family members while you are away from jail.

You may not go to your home or any other residence without permission from a jail staff member or Huber Law supervisor. You may not make any phone calls from anywhere except from your cellblock.

You are not allowed to carry any items, including mail, into or out of the jail from yourself or anyone else in the jail. You will be subject to a strip search at any time.

Failure to comply with the above will result in disciplinary action.

## **Work/Childcare Schedules**

You will be required to provide a detailed work schedule from your job supervisor on the work hour's forms provided by the jail. Your schedules may be faxed to the jail at 683-5169 by your employer.

You will not be released for work or other appointments until we have a complete and detailed schedule.

Your travel time and distance will be determined by the Huber Officer.

You may not be scheduled to work more than 12 hours in one day, 72 hours in one week and 6 days in a row. Your 6 days in a row starts after you have stayed in one day.

Exceptions for the hours and/or days out must be authorized by the court or approved by the jail administration.

## **Work Search**

\*You must have at least two (2) weeks remaining on your sentence.

\*You must have a social security card and a photo ID at the jail prior to seeking employment.

If you are an unemployed Huber inmate and wish to seek employment, you may have resumes mailed in, or request our standard application. You may request to go to the law library to complete the application. Once your application is completed, forward it to the Huber Sergeant. That, along with your completed resume, will be kept on file until your release. Your application and/or resume may be faxed to the employers you request or you can mail them with your purchased envelopes.

You will need to complete a request to the bookkeeper for Work Search envelopes. If you are deemed indigent, limit 2 work search envelopes per week, and they will be billed to your account. Instructions on where you want them sent will need to be given to the Huber Sergeant.

Work search outside the jail will only be done on Thursday of each week and at the Huber Sergeant's discretion, or by approved appointment. Items taken into consideration include job availability and job requirements.

## **School**

The Huber Sergeant will verify school hours through the school.

High School inmates are required to have a daily school activity sheet signed by the teacher for each class attended. The activity sheet must be turned in on a daily basis.

# Huber Discipline

The following is a brief list of Huber violations which may result in disciplinary action (this is not an all inclusive list):

HUBER VIOLATIONS	
H01	<b>Alcohol Violation</b>
H02	<b>Behind in Current Board</b>
H03	<b>Bringing in Contraband</b>
H04	<b>Deviated from Assigned Route</b>
H05	<b>Excessive Travel Time</b>
H06	<b>Failure to notify the jail in the event of an emergency or extended work hours.</b>
H07	<b>Failure to report to work</b>
H08	<b>Fail to turn over all earning, wages or compensations</b>
H09	<b>Lose ID bracelet</b>
H10	<b>Out over 6 days in a row</b>
H11	<b>Out over 72 hrs</b>
H12	<b>Positive drug test after initial UA</b>
H13	<b>Taking correspondence out of the jail and mailing or delivering it yourself</b>
H14	<b>Unauthorized Phone Calls</b>
H15	<b>Unauthorized Ride</b>
H16	<b>Unauthorized Stop</b>
H17	<b>Unauthorized Visitors</b>
H18	<b>Unsigned Activity Sheet</b>

Any violation of the Manitowoc County Jail rules will result in disciplinary action which may include but is not limited to the following:

- Written Warning
- Restricted privileges
- 24-hour lockdown
- Loss of one day Huber privileges
- Forfeiture of Huber law privileges for 5 working days
- Huber law privilege revoked
- Transfer-in Huber inmates sent back to Sentencing County
- Loss of good time

Violation of any law or municipal ordinance may result in a new charge being filed.

1-5 day's loss of Huber privileges will result in room and board fees being charged for the entire week.

## Miscellaneous

### **Bag Lunches/Early Meals/Late Meals**

You will be entitled to 3 meals per day. If you are scheduled to leave the jail for work or other release at least ½ hour prior to a jail meal, you will have the option of receiving an early meal.

**Breakfast:** If your out time is 5:45 a.m. or earlier, you will be offered an early breakfast.

**Lunch:** If your out time is 10:30am., 10:45am, 11:00am or 11:15am you will be offered an early lunch.

**Supper:** If your out time is 4:30 p.m., 4:45pm, 5:00pm or 5:15pm you will be offered an early supper.

If you are scheduled to return to jail from work or other release after a meal has been served, you may be entitled to a meal.

**Breakfast:** no meals will be held.

**Lunch:** If you return before 12:00 noon you will be offered a lunch meal.

**Supper:** If you return before 7:00 p.m. you will be offered a supper meal.

If you are scheduled for work or school during one of the scheduled meals, you have the option of taking a jail-issued bag lunch. You will need to sign up for a bag lunch prior to the day before your workday! If you are going to be away from the jail for 2 consecutive meals, you must put the number 2 after your last name.

If you are released for childcare, you will not be entitled to a bag lunch or early/late meal.

## Court

When you have a scheduled court date, you are required to furnish jail staff with a copy of the court paperwork. Failure to comply may delay your release for court. If your court is scheduled in another county, you must notify staff well in advance on a request slip. When returning from court you **must** provide staff with the results of the hearing.

## Inmate Worker Program

The worker program is only for sentenced Manitowoc County inmates. Inmates sentenced for more than 30 days can apply for worker status. Inmates need to submit a general request to the Community Service Coordinator. A complete assessment and interview will be conducted, along with an explanation of the rules and regulations. Good time credit will be earned at a rate of one (1) day for every 24 hours of satisfactory work.

## Vehicles

If you use your own vehicle for transportation, you may park it in the parking lot located  $\frac{1}{2}$  block west of the jail on Hancock Street. You are required to park on the North side of this lot! You will be given a green sticker to put on the rear view mirror of your vehicle. (See map for location of parking lot)

