ALASKA DEPARTMENT OF CORRECTIONS
COMMUNITY PLACEMENT

House Arrest Program (Electronic Monitoring (EM)/Offender Supervision

HOUSE ARREST AND ELECTRONIC MONITORING PROGRAM INDIGENT FORM

In accordance with Alaska Statutes, the Administrative Code and Department policy, I have reviewed the financial records for the above mentioned inmate and have determined that they lack the ability to pay full portion of the fees related to electronic monitoring. Therefore, it is recommended that under the provisions of AS 33.30.065 and 22 AAC 05.062, and DOC P&P 818.14 D.4., the Director of the Division of Probation and Parole approves a hardship and allows the payment of _____ per day for the privilege of electronic monitoring, as long as no changes occur in income.

Offender Name	**OBSCIS**	**Application date**

Electronic Monitoring Officer	**Electronic Monitoring Supervisor**

Director of Probation/Parole Signature	**Approved**	**Denied**	**Date**

Comments:_____

Proof of the following must be made available weekly

Income: _____

House Payment/Rent: _____

Food: _____

Utilities: _____

Debts: _____

Attorney Fees: _____

Child Support: _____

Medications: _____

Restitutions: _____

Court Fees: _____

Number in Family: _____