

POST CONVICTION ORIENTATION HANDBOOK



U.S. PROBATION OFFICE

**EASTERN DISTRICT OF
MISSOURI**

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Welcome



Our Mission

The United States Probation Office for the Eastern District of Missouri will assist the Court in its administration of justice; facilitate and encourage the process of long term positive change for those under our supervision; and contribute a safer community.

The officers and staff of this district are committed to assisting you as you complete your community supervision. Your officer will work with you to determine your individual needs and concerns and assist you in making positive changes in your life to ensure your success. Probation officers are tasked with both protecting the public and providing rehabilitative services to you.

You can expect to be treated with dignity and respect while on supervision. In return, we ask that you treat your officer respectfully and adhere to your conditions of supervision.

Your officer will work with you to set appointments and see you at home, work, or in the community as needed. You are also welcome to contact us with issues you need addressed. If your officer is unavailable, you may call the probation office and ask to speak to the officer of the day.

Eastern District of Missouri



St. Louis Office

United States Probation Office
Thomas F. Eagleton
United States Courthouse
111 South 10th Street, Ste. 2.325
St. Louis, MO 63102

Phone: (314) 244-6700
Fax: (314) 244-6735

Cape Girardeau Office

United States Probation Office
Rush H. Hudson Limbaugh, Sr.
United States Courthouse
555 Independence Street, Ste.1100
Cape Girardeau, MO 63701

Phone: (573) 331-8980
Fax: (573) 331-8978

Office Hours

Monday through Friday

8:00 AM to 5:00 PM

The office is closed on all Federal Holidays



Office Reporting

You should report to the probation office if you have an appointment or are directed by your probation officer to report. If you have an emergency or other issue that requires assistance, you will be seen by the duty officer if your officer is not available.

On the date of your appointment, report to the Probation Office reception area. The receptionist will inform your officer of your arrival.

DO NOT BRING any weapons including knives, mace, illegal materials, dangerous substances, liquids, or contraband to the office

DO BRING photo identification

Please dress and conduct yourself appropriately while in the office.

Telephone Reporting

You may contact your probation officer by calling the officer's direct line or mobile telephone.

If your probation officer is not available, leave your name, telephone number, and a brief message. You may contact the duty officer for immediate assistance. If you have an emergency please call 911.

Monthly Supervision Reports



Written

The probation officer may require you to submit a monthly supervision report by the 5th of every month. The report must be complete, accurate, and signed. You may also be required to attach employment and wage verification or other documentation required by the officer. An example of a written report is included.

It is your responsibility to submit reports in a timely manner. Please notify your officer when you need more reports. You may do this by including a note in the comments section of your report. For example: Dear Officer, I need more monthly reports. Thank you.

Electronic

If you choose to use the electronic reporting system, the report is also due on the 5th of every month. Email is required to begin this method of reporting.

Instructions for completing monthly reports electronically are attached.

DIRECTIONS FOR COMPLETING THE MONTHLY SUPERVISION REPORT FORM

This monthly form is to be completed at the end of each month and sent to the Probation Office no later than the 5th day of the following month (3rd day for parole cases). The form must be completed thoroughly and accurately. Do not hesitate to discuss this form with your Probation Officer if you have any questions about its completion. If something does not apply specifically to you, write **NOT APPLICABLE** in the block. Do not leave any lines blank. All entries should be neatly printed and legible.

PART A

1. Print your first, last, and middle name.
2. Print any other name that may have been used in Court.
3. Print your full street address and apartment number. **DO NOT PUT P.O. BOX OR MAIL DROP NUMBERS IN THIS SPACE.** If you live on the 1st, 2nd, or 3rd floor, list this location.
4. Print your city, state, and zip code.
5. Print the name of your apartment complex and/or community subdivision. Advise as to whether you rent or own the property.
6. This is where you may list your P.O. Box number or any other mailing address.
7. Print all phone numbers including the following: pagers, cellular phones, message numbers, (a number you may be reached at or a phone where a message can be conveyed to you) and/or answering services.
8. List all names of persons living at your residence.
9. Check **YES** or **NO** if you moved during the month.
10. Print the exact date of your move and your reason for moving. **THE PROBATION OFFICER MUST BE PERSONALLY NOTIFIED TEN DAYS PRIOR TO ANY CHANGE IN RESIDENCE.**

PART B

11. Print **NAME, ADDRESS, AND PHONE NUMBER** of your employer. If self employed, list your office address, phone number, and name of company.
12. Print name of immediate supervisor and phone extension.

13. Check **YES** or **NO** as to employers' knowledge of your criminal status.
14. Print the number of days missed from work and the specific reason for the absence.
15. Print your exact job title.
16. List the gross income which is your total income before deductions for that month.
17. Print the **EXACT** days and hours that you report to and leave from work (**DO NOT WRITE 40 HOURS**). If your shift varies, supply your Probation Officer with a copy of your weekly work schedule.
18. Check **YES** or **NO** if you had a job change or were terminated during the month. **THE PROBATION OFFICER MUST BE PERSONALLY ADVISED TEN DAYS PRIOR TO ANY CHANGE IN EMPLOYMENT.**
19. Print an exact date of termination and reason why you were terminated from the employment.

PART C

20. List all vehicles owned or driven by you. Print the year, make, model, color of the vehicle, license plate number, and name of the owner. This must be completed every month. This also includes company vehicles you may drive.

PART D

21. The amount of income you brought home after deductions in that month.
22. Any additional monies or benefits which you receive during the month such as food stamps, welfare, inheritance, loans, trust funds, spouses' income, or other.
23. Add up your net income plus any other income and write in the amount.
24. The total of all expenses incurred goes here.
25. List all debts which are past due and the amount you owe for each debt.
26. Check here whether or not you have a checking account and list the name of the bank and your account number. Indicate whether this is an individual or joint account and list who is on the signature card. List your **EXACT** balance at the end of the month. Your Probation Officer may request copies of bank statements in order to verify this information.

27. Do the same as #26 in regards to your savings account.
28. List all purchases of goods or services for which you paid \$500.00 or more during the month. Print the amount of purchase, date, description of the item or items, and the method used for payment. If you used a credit card, list which card was used.

PART E

29. If you were questioned by law enforcement, check **YES**. Otherwise, check **NO**. If yes, provide the exact date of the questioning, the title(s) of who questioned you, the name(s) of the officer(s), the name of the agency, and the reason for the questioning. **YOU MUST PERSONALLY NOTIFY YOUR PROBATION OFFICER WITHIN 72 HOURS OF THIS CONTACT. BE PREPARED TO PROVIDE YOUR OFFICER WITH VERIFICATION.** (Attach copies of citations, bond papers, complaints, or other documents for verification).
30. If you were arrested or named as a defendant in any other case, check **YES**. Otherwise, check **NO**. If yes, give the details, including the date of the charges and the disposition or status of the case (attach documentation).
31. If you resolved any pending charges this month, check **YES**. Otherwise, check **NO**. If yes, indicate the exact date of the hearing, the Court which you attended and the final disposition of the case (Attach a copy of the citation, receipt, charges, and disposition).
32. Was anyone in your household arrested or questioned by law enforcement during this month? If you check **YES**, state what relation he/she is to you, his/her full name, and the reason for the arrest. Advise your Probation Officer as to the disposition or status of the case. Otherwise, check **NO**. If you were a victim in the case, attach a copy of the police report.
33. If you had contact with anyone who has a criminal record, check **YES** and list his/her full name. Otherwise, check **NO**.
34. If you possessed or had any access to a firearm, check **YES** and explain. Otherwise, check **NO**.
35. If you possessed or used any illegal drugs, check **YES** and explain when and type of drug. Otherwise, check **NO**.

Name Bill A. Doe		Court Name (if different): William A. Doe	
PART A: RESIDENCE (If new address, attach copy of lease/purchase agreement)			
Street Address, Apt. Number: 111 Second Street		Own or Rent? Own	Home Phone: (111)222-3333 Cellular Phone: (444) 111-2222 Pager: (555)111-3333
City, State, Zip Code: St. Louis, Missouri 63101		Persons Living With You: Jane Doe, Jack Doe, Mary Doe, wife & children	
Secondary Residence Own or Rent?		Did you move during the month? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address (if different): P. O. Box 611		E-Mail Address: jdoe@computer.com	
		If yes, date moved: 01/01/01 Reason for Moving: Bought own home	
PART B: EMPLOYMENT (If unemployed, list source of support under Part D.)			
Name, Address, Phone No. of Employer: ABC, Inc. 500 First Street St. Louis, MO 63111		Name of Immediate Supervisor: Jim Smith	Is your employer aware of your criminal status? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		How many days of work did you miss? 2 Why? illness	
		Position Held: laborer	Gross Wages: 500.00 a month
		Normal Work Hours: 8:00 - 5:00 Mon. - Fri.	
Did you change jobs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Were you terminated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If changed jobs or terminated, state when and why: to receive better pay	
PART C: VEHICLES (List all vehicles owned or driven by you)			
1. Year/Make/Model/Color: Blue 1996 Ford Taurus	Mileage: 82,000	Tag Number: ABC-124 Vehicle I.D.#: 29284747575	Owner: Bill & Jane Doe
2. Year/Make/Model/Color: Red 1998 Grand Am	Mileage: 52,000	Tag Number: 345-RBX Vehicle I.D.#: 3492929298	Owner: Bill Doe
PART D: MONTHLY FINANCIAL STATEMENT			
Net Earnings from Employment (Attach Proof of Earnings) \$445.00		Do you rent or have access to: a post office box? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No a safe deposit box? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No a storage space? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Other Cash Inflows \$400.00		Name and Address of Location: N/A	
TOTAL MONTHLY CASH INFLOWS: \$850.00			
TOTAL MONTHLY CASH OUTFLOWS \$825.00			
Do you have checking account(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: First Bank Account No: 223344 Balance: \$500.00 Do you have savings account(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Bank Name: National Bank Account No: 211155 Balance: \$1,000.00 Attach a complete listing of all other financial account information, if you have multiple accounts.		Does your spouse, significant other, or dependant have a checking or savings account that you enjoy the benefits of or make occasional contributions toward? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Bank Name: N/A Account No: _____ Balance: _____	
List all expenditures over \$500 (including e.g., goods, services, or gambling losses)			
Date 11-11-01	Amount \$800.00	Method of Payment Cash	Description of Item Washer & Dryer

PART E: COMPLIANCE WITH CONDITIONS OF SUPERVISION DURING THE PAST MONTH

Were you questioned by any law enforcement officers? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, date: <u>11/01/01</u> Agency: <u>Missouri State Highway Patrol</u> Reason: <u>Traffic Citation - Speeding 85/55</u>	Were you arrested or named as a defendant in any criminal case? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, when and where? <u>N/A</u> Charges: _____ Disposition: _____
(Attach copy of citation, receipt, charges, disposition, etc.)	
Were any pending charges disposed of during the month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date: <u>N/A</u> Court: _____ Disposition: _____	Was anyone in your household arrested or questioned by law enforcement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, whom? <u>N/A</u> Reason: _____ Disposition: _____
Do you have any contact with anyone having a criminal record? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, whom? <u>N/A</u>	Do you possess or have access to a firearm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, why? <u>Found rifle in basement. Took it to parents' home.</u>
Did you possess or use any illegal drugs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, type of drug _____	Did you travel outside the district without permission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, when and where? _____
Do you have a special assessment, restitution, or fine? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Special Assessment: <u>\$50.00</u> Restitution: <u>\$100.00</u> If yes, amount paid during the month: <u>\$250.00</u> Fine: <u>\$100.00</u>	
NOTE: ALL PAYMENTS TO BE MADE BY MONEY ORDER (POSTAL OR BANK) OR CASHIER'S CHECK ONLY.	
Do you have community service work to perform? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Number of hours completed this month: <u>N/A</u> Number of hours missed: _____ Balance of hours remaining: _____	Do you have drug, alcohol, or mental health aftercare? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, did you miss any sessions during this month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Did you fail to respond to phone recorder instructions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, why? <u>N/A</u>
WARNING: ANY FALSE STATEMENTS MAY RESULT IN REVOCATION OF PROBATION, SUPERVISED RELEASE, OR PAROLE, IN ADDITION TO 5 YEARS IMPRISONMENT, A \$250,000 FINE, OR BOTH. (18 U.S.C. § 1001)	I CERTIFY THAT ALL INFORMATION FURNISHED IS COMPLETE AND CORRECT. SIGNATURE _____ DATE _____
REMARKS: U.S. Probation Officer _____ Date _____	RECEIVED _____ Mail _____ OC _____ HC _____ CC RETURN TO: U.S. Probation Office 555 Independence, Room 1100 Cape Girardeau, Missouri 63701



SUPERVISION REPORTING BY INTERNET



1. Go to <https://supervision.uscourts.gov>.

Note: Click Cambiar a español if you need to complete your supervision report in Spanish.

2. Enter the user ID in the User ID field.

Note: If your user ID is all numbers, be sure to enter the dash (-) between the groups of numbers.

3. Enter the password you received by email or by your officer in the current password field and click Log In.

4. In the next screen, create a new password. This step is only required the first time you report.

- Enter again the password you received.
- Enter a new password.
- Enter your new password again.
- Click Save to confirm your new password.

5. In the next screen, answer all the security questions. Click Save when finished.

6. Click Accept to accept the terms and conditions.

7. Your personal information and picture display.

- If this is you, click yes. Otherwise, click no and your session will end.

8. At the Main Menu, click one of the buttons:

- Submit Supervision Report - click if you would like to complete your supervision report. Go to step 9 for next steps.
- Check In – click if just checking in.
- Change your Contact Info- click if you would like to report an address, contact, email or employment change. Go to step 10 for next steps.
- Attach Documents - click if you would like to attach a file to submit to your officer. Go to step 11 for next steps.

9. Submit a Supervision Report

You will either begin your supervision report for the current month OR be presented with a list of months to report on. A list of months will only be presented if the district has the feature enabled AND you have missed a report. If a list of months appears, select a month and click Continue.

- In the next screen, click I agree to certify that you will answer the questions correctly.
- Answer each set of questions completely and correctly. Click the buttons at the bottom of the screens to answer questions and to move forward through the reporting session.

c. Review your answers in the Summary & Review screen.

- If you want to change an answer, click Change next to that answer. Click Continue to Save your new answer. Click Back to return to the Summary & Review page.

e. Scroll down to the bottom of the Summary & Review screen and click Continue. You must be

scrolled all the way down the page in order to click the Continue button. If you are not, the Continue button will appear gray.

- If you have files to attach, click yes. Otherwise, click no.

g. In the next screen, enter your password and click I agree.

h. If you would like an email confirmation confirming your submission, click yes. Otherwise, click no.

- If no missing months appear, Click OK to ending message. If you have missing reports and you want to complete them, select the month and click yes. The process will repeat. If you click no, you will be asked for a reason why. Enter the reason and click Continue.

j. Click Quit to log out of ERS. Otherwise, click Main Menu to return to the Main Menu.

10. Change your Contact Info

- Click the option from the Change your Contact Info options (Address, Employment, Email, or Phone)
- In the next screen, click I agree to certify that you will answer the questions correctly.
- In the next screens, answer each set of questions completely and correctly. Click the buttons at the bottom of the screens to answer questions and to move forward through the reporting session.

d. Review your answers in the Summary & Review screen to make sure they are correct.

- If you want to change an answer, click Change next to that answer. Click Continue to Save your new answer. Click Back to return to the Summary & Review page.

f. Scroll down to the bottom of the Summary & Review screen and click Continue. You must be scrolled all the way down the page in order to click the Continue button. If you are not, the Continue button will appear gray.

- If you have files to attach, click yes. Otherwise, click no.

h. In the next screen, enter your new password and click I agree.

- If you would like an email confirmation confirming your submission, click yes. Otherwise, click no.

j. Click OK to ending message.

- Click Quit to log out of ERS. Otherwise, click Main Menu to return to the Main Menu.

11. Attach Documents

- Click the "Attach File (5MB Max)" button.

b. Browse to your own directory and attach file.

- Your file should appear on the screen. View or delete the file as needed.

d. Repeat step c for additional files.

- Click Continue to Submit your files. Otherwise, click Cancel to return to Main Menu.

f. A confirmation will appear that your files were submitted successfully and you will be returned to the Main Menu.

- Click Quit in the top right corner to end your session.

Conditions of Supervision



Your probation officer will prepare and instruct you on your special conditions. You will receive a copy of these conditions and it is important that you ask your probation officer to clarify any issues or questions concerning your release. The conditions may vary because of the type of supervision and/or the year you were sentenced. The website below contains the full list of conditions for your review.

<http://www.uscourts.gov/services-forms/scope-probation-supervised-release-conditions>

(on the right side of the page, click the link “Overview of Probation and Supervised Release Conditions”)

Please become familiar with your Court ordered conditions and ask your probation officer for any necessary clarification.

Law Enforcement Contact



How to Report Law Enforcement Contact

You must report any contact with law enforcement within 72 hours of the event. Reporting the contact includes calling and speaking directly to your probation officer or leaving a detailed voice mail message regarding the extent of the contact. You should also leave a telephone number in order for your officer to return your call.

You must also report the contact on the monthly supervision report.

What Law Enforcement Contact Includes

- New Arrests
- Court appearances
- Questioning by a law enforcement officer
- Receiving citations, tickets, warnings for traffic or other offenses
- Any situation in which a law enforcement officer enters your name in a law enforcement database, such as when you have provided an officer with your identifying information
- If you are not sure, contact your probation officer



Travel Restrictions

You must obtain permission in advance from your probation officer to travel outside the Eastern District of Missouri for any reason. The officer may provide the permission verbally or in writing.

The Court or the Parole Commission must approve all foreign travel in advance.

Community and Home Visits

Your probation officer is required to visit you at home and may also visit you elsewhere in the community, including your place of employment, treatment facility, or community service site. The officer may visit you during non-business hours.



Selective Service

All males between the ages of 18 and 25 must register with the Selective Service within 30 days of their 18th birthday. Incarcerated men in the above age range are exempt from the registration requirements; however, they must register within 30 days of their release but before their 26th birthday.

Failure to comply with this directive may result in loss of benefits, such as student financial aid, federal and state employment, and job training under the Job Training Partnership Act. In addition, failure to register is a felony offense that carries a fine up to \$250,000 and imprisonment up to five years.

You may register online at:
www.sss.gov

Veteran's Information

If you have prior military service, you may be eligible for certain federal benefits. Please notify your supervising officer if you have previously served in the U.S. Military.

Voting Rights



Loss of Rights

A person convicted of any crime may not vote while confined under a sentence of imprisonment or while on parole or probation, Mo. Rev. Stat. 88 1 15.133(2), 561.026(1), and if convicted of an offense connected with the exercise of the right of suffrage is forever disqualified from voting. Mo. Rev. Stat. 8 561.026(2). The disqualification from voting has been held to extend to federal offenses. && ex rel. Barren v. u,35 1 Mo. 1237, 175 S.W.2d 787 (1944); Brum v. Murdock, 406 S.W.2d 294 (Mo. App. 1966).

Restoration of Rights

The right to vote is automatically restored upon final discharge from sentence, including probation or parole (unless the crime was connected to the exercise of the right of suffrage). Mo. Rev. Stat. 5 115.133(2).

Reentry



One of the primary job functions of a U.S. Probation Officer is to assist you with your reentry to society. Our mission is promote success during and beyond your involvement with the judicial process. Transitional support services and community resources are available to assist you. Please discuss this with your probation officer.

Post Conviction Risk Assessment



The Post Conviction Risk Assessment (PCRA) consists of two sections: one completed by officers and the other completed by you. The two are combined for a complete picture of your risk and needs.

The PCRA provides us with a road map for your success. It shows us the different areas of your life that may hinder your success. If we start addressing and eliminating these risk factors, we can reduce your risk, which gives you a better chance of success and reaching your goals.

PCRA Risk Levels



Risk - likelihood of recidivating
Recidivism – revoked or rearrested

Risk Levels:

High

Moderate

Low/Moderate

Low

Dynamic Risk Factors (Needs)



What are they

- Cognitions (attitudes & personalities)
- Social Networks (peers & family)
- Education & Employment
- Substance Abuse
- Recreation
- Accommodations
- Financial

Ways we can address them

- Cognitive Behavioral Therapy
- Developing prosocial relationships and activities
- Employment services
- Substance abuse treatment

Role Clarification



Role of the Officer

- Identify District's Goals of Supervision
- Support, Monitor, and Report (Court)
- Discuss Personal Goals of Supervision
- Provide Services for Assistance
- Identify and Discuss Expectations of Confidentiality

Role of the Offender

- Communication
- Compliance
- Commitment

Evacuation Procedures



If there is a state of emergency due to a tornado, earthquake, or any major catastrophe, and evacuation is recommended by the local government in the city or county in which you live, AND you choose to evacuate, you are instructed to do the following:

Contact your U.S. Probation Officer within 24 hours after your departure to advise of your relocation plan. Please provide the address and telephone number of the location where you can be reached.

If you are unable to speak with your probation officer, you should attempt to speak to the officer of the day or leave a voice mail message for your probation officer. Do not put yourself in danger waiting to talk to your officer or the officer of the day.

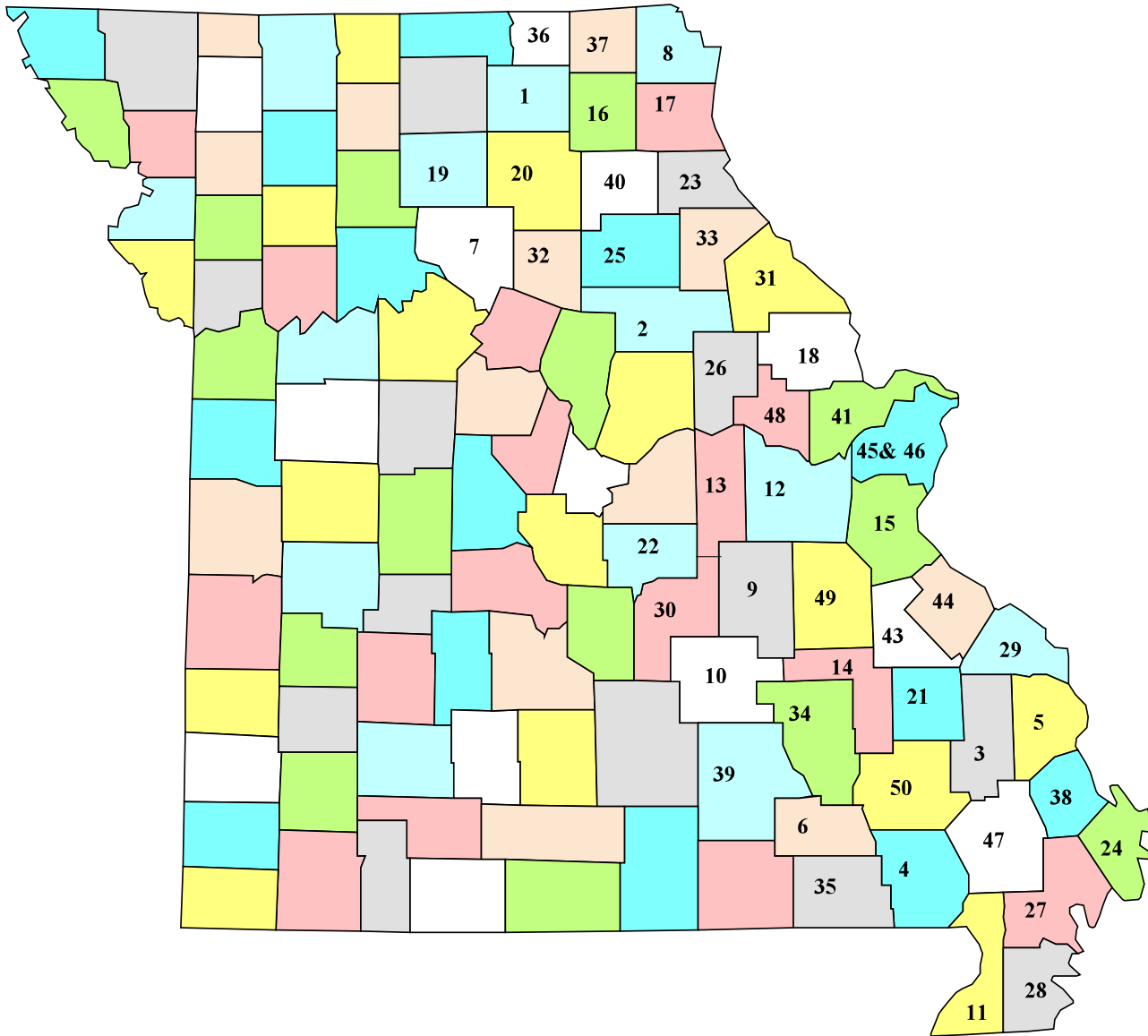
If the U.S. Probation Office where you normally report is closed or if there is no telephone service to the office, please contact another office. For St. Louis cases, contact the Cape Girardeau office. For Cape Girardeau cases, you may contact the St. Louis office at the numbers listed on Page 2.

Appendix



- Map of District
- Travel Request Form
- Financial Payment Information
- Notice Regarding Civil Rights of a Person Convicted of a Felony

United States Probation United States Courts Eastern District of Missouri



COUNTIES

- | | | | |
|-------------------|-----------------|----------------|--------------------|
| 1. Adair | 14. Iron | 27. New Madrid | 40. Shelby |
| 2. Audrain | 15. Jefferson | 28. Pemiscot | 41. St. Charles |
| 3. Bollinger | 16. Knox | 29. Perry | 42. St. Clair |
| 4. Butler | 17. Lewis | 30. Phelps | 43. St. Francois |
| 5. Cape Girardeau | 18. Lincoln | 31. Pike | 44. Ste. Genevieve |
| 6. Carter | 19. Linn | 32. Randolph | 45. St. Louis |
| 7. Chariton | 20. Macon | 33. Ralls | 46. St. Louis City |
| 8. Clark | 21. Madison | 34. Reynolds | 47. Stoddard |
| 9. Crawford | 22. Maries | 35. Ripley | 48. Warren |
| 10. Dent | 23. Marion | 36. Schuyler | 49. Washington |
| 11. Dunklin | 24. Mississippi | 37. Scotland | 50. Wayne |
| 12. Franklin | 25. Monroe | 38. Scott | |
| 13. Gasconade | 26. Montgomery | 39. Shannon | |

Eastern Missouri Probation – Travel Request Form

Name: _____ USPO: _____

Dates of Travel: _____ To _____

Destination(s): _____

Purpose of Travel: _____

Persons with whom you are traveling, contact information must be included. Attach additional sheet if necessary.

Name: _____ Phone: _____ Relationship: _____	Name: _____ Phone: _____ Relationship: _____	Name: _____ Phone: _____ Relationship: _____
--	--	--

Mode of Transportation:

Vehicle Make and Model _____ Plate Number _____ Owner _____	Outgoing flight Number(s) _____ Incoming Flight Number(s) _____ _____	Other Mode of Transport (ie: bus, train, etc) _____ _____ _____ _____
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Accommodations:

<u>Person</u> Name: _____ Address: _____ Phone: _____ Relationship: _____ Occupants of home: _____	<u>Rental/Hotel</u> Name of Property: _____ Address: _____ Confirmation #: _____ Person who secured the rental: _____
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NOTICES

If your travel is related to family emergency or funeral, please provide obituary or other verification of arrangements/necessity, as well as verification of relationship. _____ **initials**

If you are noncompliant with your conditions of supervision, travel permits may not be approved. Travel permits can be revoked after approval if noncompliance occurs or is uncovered, there was false information provided, or other concerns. _____ **initials**

All non-emergency travel permits must be completed in full and are to be submitted 15 business days in advance to your officer. _____ **initials**

Signature

Date submitted

mode of submission, circle: in person
mail text left at office other

Financial Payment Information



Criminal debt payments, including special assessment fees, fines, and restitution are accepted by the U.S. District Court.

Payments in the form of personal check, cashier's check, or money order **ARE** accepted. Cash and credit/debit cards **ARE NOT** accepted.

Please include your Case Number on the memo line and mail all payments to:

St. Louis Cases:

U.S. District Court
111 S. 10th St.
Room 3.300
St. Louis, MO
63102

Cape Girardeau Cases:

U.S. District Court
555 Independence
Suite 2000
Cape Girardeau, MO
63701

NOTICE REGARDING CIVIL RIGHTS OF PERSONS CONVICTED OF A FEDERAL FELONY

UNITED STATES:

The following Federal Civil Rights are lost as the result of a Federal Felony Conviction:

- Full citizenship is lost upon conviction of desertion in time of war from the military of naval service or conviction on a charge of treason or attempting to overthrow or bear arms against the United States.
- The privilege of holding federal office is directly prohibited by conviction of treason, destruction of public records, bribery of Government officials and other similar offenses. However, it is not directly prohibited by reason of conviction of other kinds of crime.
- The right to serve on a federal court jury.
Restoration: Obtain a Presidential Pardon.
- The right to obtain retirement annuity benefits (Public Law 769 of the 83rd Congress). Also, certain privileges and rights as a veteran (this may result from a court-martial conviction or Federal Civil Court action, but in some cases there may be no prosecution).
Restoration: Obtain a Presidential Pardon.
- Labor officials convicted of certain felonies in State or Federal Court cannot hold union office within five (5) years from the date of conviction (Public Law 86-257.73, Statute 519).
Restoration: Obtain a Presidential Pardon.
- The right of adult or YCA to receive, transport or possess any type of firearm or explosive, 18 U.S.C. Appendix 1202(a), 26 U.S.C. 5861(d).
Restoration: Obtain a Presidential Pardon.

You may not apply for a Presidential Pardon until supervision is completed. To obtain a Pardon, you will need to contact:

Office of the Pardon Attorney
U.S. Department of Justice, Suite 400
500 First Street, NW
Washington, DC 20530
(202) 616-6070
<http://www.usdoj.gov/pardon/index.html>

Understanding Criminal Thinking Styles

Learning about criminal thinking styles is important because it provides insight into the way people think and behave. By looking into your thinking styles, you may be able to understand patterns in thinking that have influenced your behavior. Do not think of these as good or bad; rather, as a piece of information that you can use to better understand how your thinking influences your behavior.

The criminal thinking styles are listed below with an explanation of each style. Some styles are proactive, meaning thinking is geared toward planning ahead. Some are reactive, meaning the thinking is impulsive and spontaneous. Your probation officer will only review the styles that are most applicable to you as indicated on the PCRA.

• **PROACTIVE:**

Mollification = making excuses

Entitlement = feeling above the law

Power Orientation = asserting power over others

Super Optimism = getting away with anything

Mollification:

- o Making excuses

- o Blaming anyone or anything for problems

- o Justifying behavior

- o Blaming personal behaviors on external things, such as victim, family, upbringing, the corrupt system, etc.

Entitlement:

- o Feeling above the law

- o Feeling unique or special, which gives permissions to violate laws or hurt other people.

- o Thinking the world owes the person something

- o Tending to confuse 'wants' with 'needs', which allows one to justify antisocial behavior

Power Orientation:

- o Asserting power over others to take what one wants

- o Wanting to be in control of environment and use power/authority to maintain or gain that control

- o Bullying, intimidating or putting someone down to make yourself look better

Super Optimism:

- o Believing that negative consequences of criminal behavior won't be imposed

- o I'll never get caught or hurt mentality

- o Believing that negative consequences or punishment from criminal conduct can be post-poned or totally avoided

• **REACTIVE:**

Cutoff= ignoring responsible action

Cognitive Indolence = lazy thinking

Discontinuity = getting sidetracked

Cutoff:

- o Ignoring responsible action
- o Avoid thinking about the things that might prevent one from engaging in illegal actions
- o Using phrases such as 'screw it' or 'f-it'
- o Using alcohol or drugs to 'cutoff' from thinking about the consequences of actions
- o Tends to be more impulsive with low frustration tolerance

Cognitive Indolence:

- o Lazy thinking
- o Looking for the easy way around problems, oftentimes criminal in nature
- o Reflects trouble with critical reasoning, logical thinking, and problem solving
- o Often accompanied by drama (with family, friends, bosses) caused by takings short-cuts to manage problems

Discontinuity:

- o Getting sidetracked
- o Finding inconsistencies between thinking and behavior
- o Losing sight of goals based on what is happening around a person
- o Often appears flighty or unpredictable because not goal directed
- o May have a hard time recognizing personal inconsistencies in thinking

Individual Criminal Thinking Styles (from PCRA Interpretation Report)

Begin by writing down your individual thinking styles. Try to identify personalized thinking that matches the style and identify times you may have used that thinking style. Was this thinking proactive or reactive?

EXAMPLE:

Criminal Thinking Style: Super Optimism (Proactive)

Times I used this style:

- 1) I have sold drugs many times without getting caught. I can do it again and no one will know.
- 2) I have used drugs while on supervision because I thought I could predict when the drug test would be and would not get caught.
- 3) _____

Criminal Thinking Style: _____

Times I used this style:

- 1) _____
- 2) _____
- 3) _____

Criminal Thinking Style: _____

Times I used this style:

- 1) _____
- 2) _____
- 3) _____

Criminal Thinking Style: _____

Times I used this style:

- 1) _____
- 2) _____
- 3) _____

My Strengths and Qualities

Things I am good at:

1. _____

2. _____

3. _____

Compliments I have received:

1. _____

2. _____

3. _____

What I like about my appearance:

1. _____

2. _____

3. _____

Challenges I have overcome:

1. _____

2. _____

3. _____

I have helped others by:

1. _____

2. _____

3. _____

Things that make me unique:

1. _____

2. _____

3. _____

What I value the most:

1. _____

2. _____

3. _____

Times I've made others happy:

1. _____

2. _____

3. _____

Additional Strengths

Setting Goals

It is important to set goals for yourself for your term of probation or supervised release and beyond. You may have criminal justice related goals (example: attend all drug testing), as well as personal goals (example: own my own home).

For goals to work, they must be Specific, Measurable, Attainable, Realistic, and Time Bound.

Below you will find definitions and examples for each area:

Specific- A goal must tell exactly what you are planning to accomplish. If you say you are going to be a good parent, what does that mean? What does a good parent do? Does it mean you will quit yelling at your children, make meals, etc.?

Measurable – How will you be able to measure when your goal has been met? Do you need to set a date? Does it need to be more specific and have a number associated with it? (Do you want to start exercising? How often?)

Attainable – This is something you can accomplish. It is within your control. You cannot control what others will do. It is very hard to determine when you will eventually get married or have a long-term relationship. You can't control what others will think of you. This must be something you alone can accomplish.

Realistic – This means that your goal is likely to occur. Will you be able to pay off your debt in two years? Will you be able to get married in two years? What if it could be harder than you think? Can you buy a house and pay it off in ten years? Is it possible to pay \$10,000 a year for a house or a car?

Time Bound – Set a time and date you could accomplish your goal. It is the “by when” guide that helps you know the deadline for your goal to be accomplished. If you want to send in an application for college, what will you send it by? By what date do you want to have lost 10 lbs.? This part of the goal helps you maintain accountability.

Example of how to make a bad goal a good goal:

Bad Goal: Lose weight

Good Goal: I want to lose 10 lbs. in 45 days from today, 9/1/17

Bad Goal: Be a good parent

Good Goal: Stop yelling at my children

Goals

PROSOCIAL SUPPORT AND PROSOCIAL ACTIVITIES

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

WHO: _____ PHONE: _____ Relationship _____

PROSOCIAL ACTIVITIES: _____

Missouri Department of Economic Development
DIVISION OF WORKFORCE DEVELOPMENT

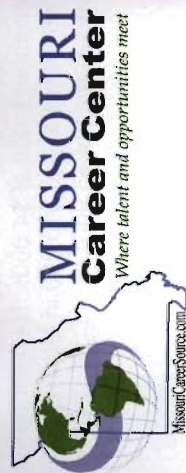
WOTC
PO Box 1087
JEFFERSON CITY, MO 65102-1087
TELEPHONE: (800) 877-8698

RELAY MISSOURI SERVICE
VOICE USER CALLING A HEARING/SPEECH
IMPAIRED USER 1-800-735-2466
HEARING/SPEECH IMPAIRED USER CALLING
A VOICE USER 1-800-735-2966

DWD-5018 (9-07)
Bus. Rel.-WOTC



WORK OPPORTUNITY
TAX CREDIT PROGRAM



INTRODUCTION

The Work Opportunity Tax Credits may be claimed by any private for-profit business. There is no limit to the number of qualifying new hires or total amount of credits distributed per year. The credits cannot be claimed on previous employees, relatives, domestic servants, or on wages federally subsidized by On-The-Job Training Programs.

WORK OPPORTUNITY TAX CREDIT

The Work Opportunity Tax Credit provides businesses tax savings up to \$2,400 per eligible worker as an incentive to hire job seekers with barriers to employment from nine targeted groups.

For seven of the nine targeted groups, the federal tax credit is 40% of the first \$6,000 in wages, for a maximum credit of \$2,400 for employees that work at least 400 hours. If the individual separates before 400 hours, but has worked at least 120 hours, the credit is 25% for a maximum credit of \$1,500.

For youth hired as summer employees between May 1st and September 15th who live in an Empowerment Zone, the tax credit is 40% of the first \$3,000 of wages, for a maximum credit of \$1,200 for employees that work at least 400 hours. If the youth separates before 400 hours but has worked at least 120 hours, the credit is 25% of the first year's wages for a maximum credit of \$750.

The tax credit for the Disabled Veteran is calculated at 40% of the eligible employees first \$12,000 in wages for the first year (up to a maximum of \$4,800) if 400 hours of employment is reached. For employees who work at least 120 hours, but less than 400 hours, the credit is calculated at 25% of the employees first \$12,000 in wages for the first year (up to a maximum credit of \$3,000).

The Long Term Family Assistance Recipient Target Group is a two-year program that provides businesses tax savings up to \$9,000 per eligible long-term welfare recipient hired. The employee must work at least 400 hours to claim the credit. The first year's credit is equal to 40% of the first \$10,000 in qualified wages for a maximum credit of \$4,000. The second year's credit is 50% of the first \$10,000 in qualified wages for a maximum credit of \$5,000.

Your business could qualify when you hire from these nine target groups:

- A member of a family that has received Temporary Assistance for Needy Families (TANF) for any nine months during the 18-month period ending on the hiring date.
- An 18-39 year-old member of a family that:
 - Received food stamps for the last six months ending on the hiring date, OR
 - An able-bodied adult without dependents who ceases to be eligible due to failure to meet the work requirements of the Food Stamp Act and received food stamps for only three months out of the last five-month period ending on the hiring date.
- An 18-39 year-old resident of the federally designated Empowerment Zones located in urban St. Louis or a resident of a Rural Renewal County.
- A 16-17 year-old Empowerment Zone resident hired between May 1st and September 15th as a Summer Youth Employee.
- A veteran who is a member of a family that received food stamps for any three months during the 15-month period ending on the hiring date; OR
 - A Disabled Veteran who is entitled to compensation for a service connected disability (10% or greater) that has a:
 - hiring date which is not more than 1 year after having been discharged or released from active duty in the Armed Forces of the United States; or
 - has had aggregate periods of unemployment during the 1-year period ending on the hiring date that equals or exceeds 6 months.
- A disabled person who completed or is completing rehabilitative services from a state agency or the U.S. Department of Veterans Affairs and has a hiring date within two years of the last services.
- An ex-felon who was convicted or released from prison within the last 12 months (or is participating in a Work Release Program).
- A person who received supplemental security income (SSI) for any month within the last 60-day period ending on the hiring date.

- A Long Term Family Assistance Recipient who received TANF benefits for at least 18 consecutive months ending on the hiring date, OR
 - A member of a family that received TANF benefits for any 18 months beginning after August 5, 1997, for applicants hired within two years after the date the 18-month period is reached, OR
 - A member of a family whose TANF eligibility expired under a Federal or State law after August 5, 1997, and is hired within two years after this eligibility expired.

EMPLOYER PROCESS - 5 EASY STEPS

1. Obtain the IRS Form 8850 (Pre-screening Notice & Certification Request) and ETA-9061 (Individual Characteristics form) at: www.doleta.gov/business/incentives/opntax/ or call (800) 877-8698 (WOTC unit).
2. Screen your applicants:
 - Use IRS Form 8850 to screen all applicants for potential target group membership. **The IRS requires you to do this on (or before) the day the job is offered.**
3. Go through your normal hiring process. If you hire someone that checked a box on the Form 8850, have this new employee complete the ETA-9061. If the applicant has an ETA-9062, they have already been certified as a member of a target group and they will not need to complete the 9061.
4. Review the forms and verify the following:
 - Employee and employer lines on the 8850 contain original signatures on the correct lines.
 - Applicant has checked a box on the 9061.
 - The forms are postmarked to the Division of Workforce Development within 28 days of the employee's start date.

5. Mail the completed forms to us at:

Attention: WOTC

**Division of Workforce Development
PO Box 1087**

Jefferson City, Missouri 65102-1087



HELP PUT AMERICA TO WORK

AND EARN FEDERAL INCOME TAX CREDITS FOR HIRING NEW EMPLOYEES

WHAT IS THE WORK OPPORTUNITY TAX CREDIT?

The [Work Opportunity Tax Credit \(WOTC\)](#) is a Federal tax credit available to employers who hire individuals from eligible target groups with significant barriers to employment. Each year, employers claim over \$1 billion in tax credits under the WOTC program. The success and growth of this income tax credit for business is beneficial for all who participate, while increasing America's economic growth and productivity.

- **WOTC reduces an employer's cost** of doing business, requires little paperwork, and applying for WOTC is simple.
- WOTC can **reduce an employer's federal income tax liability** by as much as \$9,600 per employee hired.
- **There is no limit** on the number of individuals an employer can hire to qualify to claim the tax credit.
- Certain **tax-exempt organizations can take advantage of WOTC** by hiring eligible veterans and receiving a credit against the employer's share of Social Security taxes.

WHO IS ELIGIBLE?

- **Veterans**
- **TANF Recipients**
- **SNAP (food stamp) Recipients**
- **Designated Community Residents**
- **Vocational Rehabilitation Referral**
- **Ex-Felons**
- **Supplemental Security Income Recipients**
- **Summer Youth Employees**

Visit <http://www.doleta.gov/business/incentives/opptax/eligible.cfm> for more target group eligibility information.

HOW MUCH IS THE TAX CREDIT

Employers can earn a tax credit of between \$1,200 and \$9,600 per employee, depending on the target group of the new employee and the number of hours worked in the first year. Employees must work at least 120 hours in the first year of employment to receive the tax credit. Visit <http://www.doleta.gov/wotc> for the maximum tax credit for each WOTC target group.

HOW TO APPLY

To apply for WOTC, employers should follow these steps:

1. Complete [IRS Form 8850](#) by the day the job offer is made.
2. Complete [ETA Form 9061](#), or complete [ETA Form 9062](#) if the employee has been conditionally certified as belonging to a WOTC target group by a [State Workforce Agency](#), Vocational Rehabilitation agency, or another participating agency.
3. Submit the completed and signed IRS and ETA forms to your [State Workforce Agency](#). Forms **must be** submitted within 28 calendar days of the employee's start date.
4. Wait for a final determination from your [State Workforce Agency](#). The determination will indicate whether the employee is certified as meeting the eligibility for one of the WOTC target groups.
5. After the target group employee is certified by the [State Workforce Agency](#), file for the tax credit with the [Internal Revenue Service](#).

INFORMATION AND RESOURCES

Visit the WOTC web-site, <http://www.doleta.gov/wotc>, for more information on eligibility requirements, how to apply for the tax credit, and WOTC contacts in your state.

Visit the IRS web-site, <http://www.irs.gov>, for more information on how to claim the tax credit.



The Federal Bonding Program

IT'S SIMPLE

The fidelity bonds issued by the FBP guarantee the job honesty of job seekers to employers who want to hire them. Employers receive the bonds free-of-charge as an incentive to hire these applicants. The FBP was designed to reimburse the employer for any loss due to employee theft of money or property up to \$5,000 during the first six months of a selected individual's term of employment.

Accessing the program is easy:

- **NO** application for job seekers to complete
- **NO** forms for employers to submit or sign
- **NO** additional paperwork after the bond expires
- **NO** deductible if employee dishonesty occurs
- **NO** age requirements for the bonded individuals (other than legal working age in State)

Fidelity bonds can be applied to:

- **ANY** job
- **ANY** state
- **ANY** employee dishonesty committed on or away from the work site
- **ANY** full or part time employee paid wages with Federal taxes automatically deducted, including individuals hired by temp agencies. However, self-employed people are not eligible for FBP bonds.



THE FEDERAL BONDING PROGRAM

U.S. DEPARTMENT OF LABOR

Employers and Job Seekers

Employers and Job Seekers

GET A BOND

Our national network of State Bonding Coordinators work hand-in-hand with local, state, regional, and national employers; workforce agencies; job seekers; and grantees to issue bonds. If you are seeking bonding services and/or a job you should call the following toll-free number, **1.877.US2.JOBS (1.877.872.5627)** for:

1. the location of the workforce office/one-stop center closest to you,
2. the phone number of the State Bonding Coordinator in your state. If no coordinator is assigned in a particular state, the nearest career center/one stop center for employment may assist.

** Employment offer must be presented to an individual prior to bond being issued.*



No other U.S. program provides Fidelity Bonding services.



WHAT IS IT?

The U.S. Department of Labor established the Federal Bonding Program (FPB) in 1966 to provide Fidelity Bonds that guarantee honesty for “at-risk,” hard-to-place job seekers. The bonds cover the first six months of employment. There is no cost to the job applicant or the employer.

Thousands of employers across the country have integrated the Federal Bonding Program into their hiring practices — industries that support our country's economy — hospitality, retail, construction, transportation, auto repair, manufacturing, healthcare, banking, tourism and more. The Federal Bonding program has placed over 50,000 at-risk job seekers into employment through bonds. This unique hiring incentive tool targets individuals whose backgrounds can pose significant barriers to securing or retaining employment including:

- Previously incarcerated men, women and youth
- Individuals in recovery from substance abuse
- TANF recipients
- Individuals with poor credit records
- Economically disadvantaged youth and adults with little or no work histories
- Individuals dishonorably discharged from the military

WHO WE SERVE



Employers

The mission of the U.S. Department of Labor's (USDOL) Federal Bonding Program (FBP) is to give you the peace of mind that you can safely provide all individuals job opportunities with limited risk.

Reducing barriers for people who have been in contact with the criminal justice system and getting their lives back on track builds strong, healthy communities.

Visit us online at:
www.bonds4jobs.com

Job Seekers

Each year, thousands of previously incarcerated men, women, and young adults return home to restart their lives; unfortunately to ridicule, discrimination, and hostility. No wonder annually, America's 600,000 returning citizens are experiencing an up-hill battle that most times leads to recidivism. Many of those instances involve repeat, non-violent offenses due to lack of access to education, health/mental care, treatment, housing, training, and employment.

The Federal Bonding Program can help you if you are facing barriers to employment by providing fidelity bonding for the first six months on the job applicants.



FEDERAL BONDING PROGRAM

The Missouri Federal Bonding Program is a no-cost, job-incentive program to increase the hiring of job seekers and to promote the retention of employees considered to be “at risk.”

“At risk” job seekers and employees are defined as people who have declared bankruptcy, have bad credit, have little or no work history, receive public assistance or who are ex-offenders.

Fact is, as long as the employer requests the service, the Missouri Federal Bonding Program can be used to overcome most negative issues that an “at risk” person might have.

Interested employers and “at risk” job seekers should visit the nearest Missouri Career Center, dial 1-888-728-JOBS (5627) or visit www.jobs.mo.gov to request assistance with this program.

To receive fidelity bonding assistance the employer must verify: that a job or promotion offer has been made by the employer; that the “at risk” person is of legal working age; that the job is legitimate; and that the federal taxes of the “at risk” person will be automatically deducted from his/her pay.

This no-cost, no-deductible insurance coverage begins the day the bonded person starts work and ends six months later. Fidelity insurance provides an easy method for an employer to recoup losses incurred due to the illegal acts of fraud, embezzlement, larceny and theft committed against the employer by an “at risk” person who is bonded.

For a fee, an employer can obtain an extended period of coverage.

The minimum amount of coverage offered is \$5,000. Additional amounts of coverage can be provided if the need has been justified by the employer.

Insurance coverage can be for Full- or Part-time employment. Full-time employment is preferred.

Throughout Missouri, fidelity bonds have been issued to numerous employers so they could bond various “at risk” people into varied occupations. Some of the occupations which “at risk” people have been bonded into include: Automobile Mechanic, Cashier, Clerical Assistant, Certified Nursing Assistant, Cook, Heavy Equipment Operator, Janitorial Service, Landscaper, Paralegal, Parts Manager, Warehouse Worker, Welder and Window Washer.

Fidelity Bonds are not for entrepreneurial, court, professional or bail purposes. The sole purpose of these bonds is to guarantee personal integrity in the workplace.

For more information, contact:

Missouri Federal Bonding Coordinator:
LaMont Brown
421 East Dunklin Street
Jefferson City, MO 65101
573-526-8217
lamont.brown@ded.mo.gov

Missouri Workforce System services are equal opportunity employer/programs.
Auxiliary aids and services are available on request to individuals with disabilities.
Missouri TTY users can call (800) 735-2966 or dial 7-1-1 for Relay Missouri.

TAKE CONTROL OF YOUR SUPERVISION

