Dependent Care Application

Inmate's Name _____ Block _____ Date _____

The following application is designed to meet the requirements of the Circuit Court Judges of Brown County. You are required to answer each question truthfully. Failure to answer any question correctly will lead to forfeiture of **all** Huber privileges.

Have you ***ever*** received:

- a Harassment Injunction ◯ Yes ◯ No
- an Abuse Injunction ◯ Yes ◯ No
- a Child Abuse Allegation ◯ Yes ◯ No
- a CHIPS Petition ◯ Yes ◯ No
- an arrest for Family Violence ◯ Yes ◯ No
- Revocation of Huber Privileges ◯ Yes ◯ No
- Conviction of a Sexual Offense involving Minors ◯ Yes ◯ No

You are allowed to provide care for only your children. Therefore you are required to <u>provide a copy of each child's birth certificate</u>. Also, list each child's:

Name	Age	School	Grade

Where will child care be done? (Must be in Brown County and have a phone)

Address _____ Phone No _____

Who will care for the child(ren) while you are in jail?

Name _____

Address _____ Phone No _____

Where do they work?

Employer _____ Supervisor _____

Employer Address _____ Phone No _____

Hours of Employment (guardian's) _____

Days of the week employed _____

If granted Huber for child care, you are required to stay home with the children at all times unless granted prior authorization. You are not allowed to socialize or meet with friends or family while you are away from jail. You are required to answer all phone calls. Failure to do so will lead to forfeiture of child care privileges and could provoke petitioning sentencing judge for revocation of all Huber privileges.

All of the information listed above is true and correct.

Signature: _____ Date: _____

List the hours and days of the week you are requesting to do child care. Keep in mind that you may not exceed 12 hours per day, 60 hours per week, 6 days out per week.

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