



STATE OF ALASKA
DEPARTMENT OF CORRECTIONS

Electronic Monitoring Permission to Enter and Search Form

Offender Name: _____ Offender #: _____

- I, _____, have been informed by _____ of my Constitutional Right not to have an entry made into/onto the premises and property owned by me and/or under my care, custody and control, without a warrant. I understand my waiver of this right is a condition of my Electronic Monitoring (EM).
- Knowing it is my lawful right to refuse to consent to such entry without a warrant, I willingly give my permission to the above-named officer(s), and any other officer(s) appointed to assist, to complete an entry and search of my person, personal property, residence, or any vehicle in which I may be found, or are within my custody and control.
- In the event DOC personnel who are supervising my placement determine that I have violated conditions of the placement, the above officer(s) and/or agent(s) appointed to assist, have my permission to enter my premises and remove me for transfer to an appropriate Correctional Institution/Community Residential Center.
- This written permission to enter and search without a warrant is given by me to the above officer(s) voluntarily without any threat or promise of any kind, at _____ (am / pm) on this ____ day of _____, 20____ and it shall last throughout the duration of my Electronic Monitoring.

Offender Printed Name

Signature

- I have been informed of my Constitutional right not to have an entry made into/onto the premises and property owned by me and/or under my care, custody, and control without a warrant. I understand that my waiver of this right is a condition of the EM Program. Knowing it is my lawful right to refuse to consent to such entry without a warrant, I willingly give my permission to the above-named officer(s), and any other officer(s) appointed to assist, to complete an entry and search of my person, personal property, or residence within my custody and control.
- This written permission to enter and search without a warrant is given by me to the above officer(s) voluntarily without any threat or promise of any kind, at _____ (am / pm) on this ____ day of _____, 20____ and it shall last throughout the duration of my Electronic Monitoring.

Cohabitant Printed Name

Signature

Cohabitant Printed Name

Signature

Cohabitant Printed Name

Signature

Witnessed by EM Officer Printed Name

Signature