

PRISON RAPE ELIMINATION ACT (PREA) COMPLIANCE ACKNOWLEDGEMENT

SOUTHWEST MULTI-COUNTY CORRECTION CENTER

(04-2020)

Name: (printed)	Position/Agency/Company:
Have your actions while on the job ever caused your employer to take disciplinary action or have you ever resigned from a position while under investigation for sexual harassment? ____ Yes ____ No	
Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? ____ Yes ____ No	
Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, if the victim did not consent or was unable to consent or refuse? ____ Yes ____ No	
Have you been civilly or administratively adjudicated to have engaged in the activity as described above? ____ Yes ____ No	
I acknowledge residents committed to the custody of Southwest Multi-County Correction Center (SWMCCC), or who are under the supervision and management of SWMCCC, will be free from the following: Sexual Abuse to include; Sexual abuse of a resident by another resident, staff member, contractor, service provider or volunteer; includes any of the following acts, whether consensual or not, is coerced into the act by overt or implied threats of violence, or unable to consent or refuse: (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight; (2) Contact between the mouth and the penis, vulva, or anus; (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation. Sexual Harassment to include; Any unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed toward another; and any verbal comments or gestures of a sexual nature to a resident by a staff member, contractor, service provider or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures. Voyeurism by a staff member, contractor, service provider or volunteer; An invasion of privacy of a resident or juvenile, by staff for any reasons, unrelated to official duties, such as peering at resident or juvenile who is using a toilet to perform bodily functions; requiring a resident or juvenile to expose their buttocks, genitals, or breasts; or taking images of all or part of a resident or juveniles naked body or of a resident or juvenile performing bodily functions.	
ACKNOWLEDGEMENT	
I acknowledge I have read and understand the requirements of the Prison Rape Elimination Act (PREA) and acknowledge the SWMCCC's zero-tolerance towards all forms of sexual abuse and harassment. I must <u>immediately</u> report any information or knowledge of sexual abuse or sexual harassment of a resident by another resident, staff member, contractor, service provider or volunteer, to a SWMCCC staff member in writing or verbally. By signing this agreement, I acknowledge I understand and will comply with this agreement. I understand a violation of this agreement may result in the termination of any contract and the imposition of civil penalties under state and federal law.	
Signature:	Date: