

Employer Work Release Agreement Information

The Grant County Circuit Court has sentenced _____ to the Grant County Jail with Huber privileges.

The Huber Law program is governed by State Statute 303.08.

To employ this person, you agree to the following regulations.

1. All check stubs are to show the total hours, gross earnings, and deductions. All taxes are to be deducted.
2. By State Statute, persons under “Huber Law” sentence, wages can not be garnished.
3. Proof that the employee is covered by “Workman’s Compensation” or “Liability” insurance must provided to the jail. Insurance Co _____ Policy# _____ This must be furnished by insurance co., on Insurance Company letter head paper. This may be faxed to the jail at (608) 723- 5203. Jail staff will not be contacting insurance company for the information.
4. You are to report to the jail (608) 723-6372 any misconduct, absenteeism, layoff, termination or injury.
5. You required to contact the jail (608) 723-6372 for prior approval of any unscheduled:
mandatory overtime
schedule changes
job site location changes
Violations of this agreement may result in loss of work privileges for the inmate. The Huber inmate may never volunteer for any of the above.
6. You need to supply:
WORK HOURS INFORMATION Sunday _____ to _____ Mon-
day _____ to _____ Tuesday _____ to _____ Wednes-
day _____ to _____ Thursday _____ to _____ Friday
_____ to _____ Saturday _____ to _____
7. You need to supply:
PAYROLL
Date of next check _____ Hourly wage _____
Pay period is: _____ Weekly _____ Every 2 weeks _____ Once a month

8. You need to supply:

Employer _____ Date _____
Address _____ Phone # _____ Cell # _____
Supervisor _____ Phone # _____ Cell # _____

9. Important Note: The rules and details on this web page are subject to change at anytime without notice!

10. I have read the above requirements and agree to abide by them.