



SHERIFF

WASHINGTON COUNTY

Washington County Jail LAPTOP USER AGREEMENT

I request permission to use a laptop computer or a tablet during professional visits. As a condition of that permission, I understand and agree to the following:

Permitted Uses

- Word processing, such as recording information in defendant's electronic file
- View and/or listen to electronic evidence in current criminal case
- Record test responses; for example, as part of a drug and alcohol evaluation, placement evaluation, or PSI
- Language translation

Not Permitted

- Internet access
- Any other form of communication with a person outside the jail including but not limited to instant messages, email, text messaging, or video conferencing
- Use of cameras
- Display of graphically sexual or violent photos or other evidence in the pods (Please request Central Visiting for this purpose.)

If I use a laptop computer or tablet for any purpose not permitted, I understand that I will lose the privilege of bringing such equipment with me during professional visits, and may lose my jail visiting privileges entirely.

Signature

Date

Printed Name

Occupation/Law Firm or Agency