

NOTE: READ THIS FORM CAREFULLY. IT IS AN ADDENDUM TO THE FELONY PLEA FORM AND PART OF THE OVERALL AGREEMENT WHICH WILL BE PART OF THE SENTENCE

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
IN AND FOR ST. LUCIE COUNTY, STATE OF FLORIDA

STATE OF FLORIDA

CASE NUMBER(S): _____

vs.

DEFENDANT

_____ /

**FELONY PLEA FORM ADDENDUM
SEX OFFENDER PROBATION CONDITIONS**

The following special conditions will be a critical part of my probation and I, by signature below, agree that these conditions will be part of my probation. I am acknowledging that I have read the conditions and I understand the conditions. I am waiving any right which I may have to require the Judge to orally (or in writing) pronounce the conditions. The specific conditions are as follows:

1. I must observe a curfew from 10 p.m. to 6 a.m. daily.
2. I must not live within 1,000 feet of a school, daycare center, park, playground or other place where children regularly congregate (where the victim in the charge was under 18 years of age)
3. I will enroll in, actively participate in and successfully complete a sex offender treatment program, at my own expense, as directed by a probation officer, unless one is not available within a 50-mile radius of my residence.
4. I may not have any contact with the victim in this case, directly or indirectly, nor through a third person, unless approved by the victim, offender's therapist, and the sentencing court.
5. If the victim was under the age of 18, a prohibition on contract with a child under the age of 18 except as otherwise ordered by the court pursuant to provisions of F.S. 948.30(1)(e).
6. If the victim was under the age of 18, a prohibition on working for pay or as a volunteer at any place where children regularly congregate, including, but not limited to: **schools, day care centers, parks, playgrounds, pet stores, libraries, zoos, theme parks, and malls.**
7. Unless otherwise indicated in the treatment plan provided by the sexual offender treatment program, a prohibition on viewing, accessing, owning or possessing any obscene, pornographic, or sexually stimulating visual or auditory material including telephone, electronic media, computer programs, or computer services that are relevant to the offender's deviant behavior pattern.
8. I shall submit a specimen of blood or other approved biological specimen to the FDLE to be registered with the DNA Databank.
9. I must make restitution to the victim for all necessary medical and related professional services for physical, psychiatric, and psychological care.
10. I must submit to warrantless searches by a probation officer of my person, residence, current location, and vehicle(s).
11. As part of any treatment program I may be required to participate in, I must submit, at least one time per year, at my expense, to a polygraph examination to obtain information necessary for risk management and treatment and to reduce denial mechanisms. The polygraph examinations must be conducted by a polygrapher trained specifically in the use of the polygraph for the monitoring of sex offenders, where available. The results of the polygraph examination may not be used as evidence in court to prove that a violation of community supervision has occurred.

12. I must maintain a driving log of any place I go in a motor vehicle. I may not drive a motor vehicle alone without the prior approval of a probation officer.
13. I may not obtain or use a post office box without the prior approval of a probation officer.
14. (If there was sexual contact:) I must, at my own expense, submit to an HIV test with the results to be released to the victim and/or the victim's parent or guardian.
15. I must submit to, and pay for, electronic monitoring at the current per diem rate when deemed necessary by a probation officer and his or her supervisor, and ordered by the court at the recommendation of the Department of Corrections. I must abide by all rules and regulations of the monitoring.
16. For offenses committed on or after July 1, 2005, I shall not access the Internet or other computer services (including on a phone) until the treatment provider, after completing a risk assessment, approves and implements a safety plan for my accessing or using the Internet or other computer services.
17. I will submit to mandatory electronic monitoring of my location, and will reimburse the State of Florida Electronic Monitoring Trust Fund as provided by Florida Statutes Section 948.09(2) at the current per diem rate, plus a 4% surcharge. I am responsible for the care of the equipment used for monitoring. I will follow all rules of the Department of Corrections governing electronic monitoring.
18. If a designated sexual predator under 775.21, I may not possess a prescription drug as defined in F.S. 499.003(25), for the purpose of treating erectile dysfunction.

Date: _____ / _____, 20____.

DEFENDANT (SIGNATURE)

ATTORNEY FOR THE DEFENDANT (SIGNATURE)

INTERPRETER (IF NEEDED)