**Adult Probation Office**

Enter office address.

**Phone:** Enter phone #. **Fax:** Enter fax #.

Click here to enter a date.

Enter CWS Partner name.

Enter CWS Partner address.

Re: **Becoming A Department Of Corrections (DOC) Community Work Service (CWS) Partner**

Dear Enter CWS Partner contact name:

Thank you so much for your interest in becoming a CWS Partner for the Department of Corrections. CWS is one of the few sentencing options where offenders through their labor are required to return something to the community. DOC looks for partners who are willing to allow a felony offender to perform community work service at their organization. Sometimes these offenders may also have misdemeanor convictions too, as well as previous criminal histories in Alaska or outside of Alaska.

We do our best to place offenders with partners where they can succeed in fulfilling their CWS obligation while providing the organization with useful labor. CWS provides offenders with an opportunity to become productive citizens, teaches pro-social behaviors and new skills. Additionally the overall experience of CWS can help reduce recidivism.

**We ask that as a partner, you (or a designee) be willing to monitor our offender and complete ‘Time Sheets’ to ensure compliance with their CWS obligations. This means you will need to verify the offender’s arrival and departure from work, as well as the number of hours of service they provide each day.**

If you are willing to have our offenders engage in CWS at your organization and you are willing and able to monitor their service as described above, please sign on the CWS Partner line below to acknowledge your agreement. Please return this signed letter to me at the above address.

Thank you, and if you have questions please contact me at: (907) Enter # or at: Enter e-mail address .

Probation Officer or Criminal Justice Technician Date

Community Work Service Partner Date

Distribution:

CWS Partner Copy: File Copy: