

KOSHER DIET PARTICIPATION AGREEMENT

(effective upon transfer to a kosher institution or date signed)

(Print Name)

(Number)

(Institution)

I would like to participate in the Kosher Diet Program. I understand that to be served a kosher diet, special food may have to be procured and special preparation practices must be used.

Because of this, I agree to comply with the following conditions:

- A. I understand that I may change my religion and the religion's diet not more than once each year.
1. The Kosher Meal Program must be requested and is available only to those inmates of faiths whose religious belief requires them to practice kosher dietary laws.
 2. Because of the complexity of the Kosher Meal Program, it is not available at all institutions, and inmates requesting and approved for the Kosher Diet Program may be transferred to a participating institution.
 3. During Passover and approved fasts, the Kosher Meal Program will include meals for observance of those Jewish holidays to include sack lunch meals before and after each fast with no regular meals being served the day of the fast.

(Special Note: A person does not have to be on the Kosher Diet Program to participate in Passover and other Jewish holiday meal observances. Being removed from the Kosher Diet Program does not prevent an inmate from celebrating Passover and other Jewish holiday meal observances.)

- B. I understand that if I voluntarily request that my kosher diet be canceled, I must do so in writing, and I must wait at least one year from my request to cancel before requesting the diet be reinstated for me.
- C. During meals, I will possess on my food tray and eat only those food items served as a part of the Kosher Diet Program.
- D. I will not purchase, possess, or consume any food items that are not permitted under my religious diet. I understand that my Canteen purchases will be routinely monitored. Specifically, if I purchase, possess, or consume any items that contain pork or shellfish, I will be terminated from the Kosher Diet Program.
- E. The Department of Corrections spends a significant amount of money to ensure your ability to practice your faith and meet the dietary laws. Therefore, complete participation is required. Missing more than two meals per week without written justification will be cause for dismissal from the program.
- F. I will follow all institutional policies for dining in my institution.
- G. I will not provide any portion of my specially prepared meal to other inmates. Sharing any part of my kosher meal will result in automatic termination from the Kosher Diet Program.
- H. I will not collect religious food items (other than Canteen items) in my cell.
- I. I understand that if I violate one of the requirements in paragraphs C, D, or E, I will receive one written warning but will be allowed to continue to participate in the Kosher Diet Program. A second violation within a one-year period will result in termination from the Kosher Diet Program.
- J. I understand that if I violate one of the requirements in paragraphs F, G, or H, disciplinary shall be issued for violations of the Offenses and Penalty Code in CPP 15.2.

By my signature below, I acknowledge that I have read or had read to me by a KY DOC employee or contract worker the contents of this Agreement. I further agree that if permitted to participate in the Kosher Diet Program, I will abide by the requirements of participation set forth above in this Agreement.

Inmate Signature: _____

Date: _____

Staff Witness: _____

Date: _____

DISTRIBUTION: Deputy Warden; Food Service; Chaplain