

(Address of Outside Medical Care Giver)

Date

Mr. William Kissel
Director of Health Services
2 Martin Luther King, Jr. Drive
East Tower - Floyd Building
Atlanta, Georgia 30334

Re: Department SOP Prohibiting sexual abuse,
sexual contact and sexual harassment of
sentenced females.

Dear Mr. Kissel:

This is to certify that I have read and understand the Department of Corrections SOP which prohibits sexual contact, sexual abuse and sexual harassment of sentenced females.

I certify further that I will ensure that each employee of this agency/facility/office will be made aware of the terms of the above mentioned SOP prior to their being allowed to come in contact with any sentenced female or, in the case of an emergency requiring rapid response, as soon as the emergency has been concluded.

Sincerely,

John Doe
Medical Administrator
(or equivalent)