

Incarcerated Individual Discipline Level 4/5 Sanction & EI Review Request

Today's Date:

Incarcerated Individual Name:	OID:
Discipline Staff:	Facility: Select A Facility

In compliance with policy 303.010(B)(4) review is being sought to charge the above incarcerated individual with a severity Level 4 or Level 5 discipline rule violation.

Incarcerated Individual Discipline Rule Violation (Check all that apply):

LEVEL 4 Select Circumstance: None SEG 60-180 EI 0-270	LEVEL 5 Select Circumstance: None SEG 180-360 EI 0-720
<input type="checkbox"/> 330 Arson (RCV)	<input type="checkbox"/> 341 Sexual Abuse of Incarcerated Individual (RCV)
<input type="checkbox"/> 413 Assault of Staff with Weapon (RCV)	<input type="checkbox"/> 430 Holding Hostage (RCV)
<input type="checkbox"/> 414 Assault of Incarcerated Individual with Weapon (RCV)	<input type="checkbox"/> 440 Homicide (RCV)
<input type="checkbox"/> 420 Riot (RCV)	<input type="checkbox"/> 444 Assault of Staff with Bodily Fluids and Significant Exposure (RCV)
<input type="checkbox"/> 439 Escape from Secure Custody (RCV)	<input type="checkbox"/> 450 Assault with Significant Bodily Harm of Staff (RCV)
<input type="checkbox"/> 441 Assault with Bodily Harm of Staff (RCV)	<input type="checkbox"/> 460 Assault with Significant Bodily Harm of Incarcerated Individual (RCV)
<input type="checkbox"/> 442 Assault with Bodily Harm of Incarcerated Individual (RCV)	<input type="checkbox"/> 490 Sexual Abuse/Contact of Staff (RCV)

Requested Disciplinary Segregation Sanction:

Requested Extended Incarceration Sanction:

Level 4 or Level 5 Violation Sanction Reviewed

Facility AWA:	Signature and Date:
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Level 4 or Level 5 Violation Sanction Reviewed

Facility Warden (EI of 31-75 days):	Signature and Date:
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EI 75+ Days Review:

Deputy. Commissioner:	Signature and Date:
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Summary of the incident with all evidence to support the charge:

Items Included in Review Request	
<input type="checkbox"/>	Incarcerated Individual Discipline History Report
<input type="checkbox"/>	Notice of Violation
<input type="checkbox"/>	Incident Reports
<input type="checkbox"/>	Mental Health Screening for SDMP – (301.088B if applicable)

Analysis of Violation Sanction: