

<b>Incarcerated Individual Name:</b>	<b>OID:</b>
<b>Facility:</b> Select A Facility	<b>Living Unit &amp; Cell:</b>

## Notice of Hearing Date

**Hearing date:**

**Discipline Report #:**

**Discipline Rule Violation(s):**

**I acknowledge receipt of this Notice of Hearing.**

**Incarcerated Individual Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Delivered by:** \_\_\_\_\_

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**\*Notice of Hearing was not served to me within 24 hours of the hearing. I consent to a hearing held within less time.**

**Incarcerated Individual Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_