

## WARRANT REVIEW CHECKLIST

NAME: \_\_\_\_\_

ODOC: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

OFFENSE: \_\_\_\_\_

CASE #: \_\_\_\_\_ COUNTY OF CONVICTION: \_\_\_\_\_

SENTENCING DATE: \_\_\_\_\_ DISCHARGE DATE: \_\_\_\_\_

SENTENCE LENGTH: \_\_\_\_\_

RULE VIOLATIONS: \_\_\_\_\_

NEW CHARGE: \_\_\_\_\_

OFFICER: \_\_\_\_\_ REGIONAL OFFICE: \_\_\_\_\_

\_\_\_ 1. PAROLE CERTIFICATE/DATE OF PAROLE \_\_\_\_\_

\_\_\_ 2. CONSOLIDATED RECORD CARD

\_\_\_ 3. VIOLATION/SUPPLEMENTAL REPORT

\_\_\_ 4. COURT DOCUMENTS IF NEW CHARGES (Information Sheet and J&S)

\_\_\_ 5. SUPPORTING DOCUMENTS (UA results, Sanction forms, etc.)

\_\_\_ 6. PAST YEAR OF CHRONOLOGICAL RECORDS

\_\_\_ 7. MOST RECENT ASSESSMENT/REASSESSMENT

**NCIC** YES \_\_\_ NO \_\_\_

IF ABSCONDER, INCLUDE:

\_\_\_ 8. ABSTRACT

\_\_\_ 9. PHYSICAL IDENTIFICATION FORM

\_\_\_ 10. PAROLE ABSCONDER CHECKLIST

**COMMENTS:**