

PAROLE RESIDENCE and EMPLOYMENT VERIFICATION REQUEST

Facility/Region: _____ Date: _____

DUE TO PAROLE PROCESS UNIT NO LATER THAN: (date) _____

Name: _____ Docket type/date _____

ODOC# _____ DOB: _____ Race/Gender: _____

SS# _____

Stipulation completion dates: _____

CRF#(s) _____ County(s): _____

HOME OFFER: Name/relation: _____

Address: _____

Phone: (Business) _____ (Home) _____

Must include directions if PO Box, Rural Route or Apt Complex and Apt #. Directions attached?

Yes__ No __

EMPLOYMENT OFFER: Name: (Business/Individual) _____

Address: _____

Phone: (Business) _____ (Home) _____

Must include directions if PO Box, Rural Route or Suite #. Directions attached? Yes__ No __

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INVESTIGATION

Region: _____ Date sent to Region: _____

DATE DUE FROM REGION: _____

Home Offer: Valid _____ Invalid _____

Employment Offer: Valid: _____ Invalid _____

(Additional comments attached? Yes __ No __)

Reporting Instructions: _____

P&P Officer _____ Supervisor _____

FOR INFORMATIONAL PURPOSES ONLY

(MAY NOT BE USED TO DENY A HOME OFFER)

City/County Officials - No outstanding warrants: _____

Outstanding warrants (case #) _____ Jurisdiction _____

Protective order (case#) _____ County _____ Victim _____

Other Comments _____