## Oklahoma Department of Corrections Kosher/Halal Diet Request Form

It is the intention of the Oklahoma Departn whose faith or re	nent of Corrections to eligion requires this a		I diet to inmates
This request is for the following diet:	☐ Kosher Diet	☐ Halal Diet	
Submit this request form to the facility (request and document to the case man		s without a facility chap	ain, submit the
Inmate's Name		ODOC Number	
Inmate's Religion or Faith		Facility/Unit/Cell	
BY SIGNING AND SUBMITTING THIS  • I attest to the fact that my faith or Halal diet and I would do so	h/religion REQUIR	ES me to restrict myse	elf to a Koshe
I will not barter prepackage     3. I will not take the prepackage areas.     Any violation of rule 1 will I Violations of rules 2 and 3 will result in the same allowed to request remove removed, you will not be allowed to subserve in the same are subserved.	kaged Kosher or Ha be addressed in ac sult in misconduct al from a religious	cordance with OP-030 s in accordance with ( diet at any time. If you	0112. OP-060125.
Inmate's Signature		Date	
Due to ordering and shipping requirem receiving the diet.	ents, it can take up	to 20 days before new	requests begin
Chaplain Review: ☐ Approve	d	☐ Denied	
Chaplain's Signature Reason for Denial		Date	