

**Oklahoma Department of Corrections
Religious Diet Non-Compliance Report**

Inmate's Name		ODOC Number	Date
Inmate's Religion/Diet	Facility	Housing Unit	

_____ You were observed consuming or in possession of food(s) in violation of the religious diet agreement (OP-030112 entitled "Religious Services," (Attachment C)

_____ You have purchased canteen items in violation of the religious diet agreement (OP-030112 entitled "Religious Services," (Attachment C)

Circumstances of the incident (specific place, time, items, explanation):

Chaplain Review

The chaplain has discussed the incident with the above-named inmate. This review has resulted in:

_____ No action taken – No violation

_____ The determination of a violation of the Kosher/Halal diet. According to OP-030112, section VI. this violation is the:

_____ First violation – Warning

_____ Second violation – Probation

_____ Violation during probationary period – Suspension for nine months

Chaplain's Signature	Date
----------------------	------

Inmate's Signature	Date
--------------------	------