

FACILITY MISCONDUCT REPORT RECORD

FACILITY HEAD SIGNATURE

MONTH

YEAR

FACILITY CODE

FACILITY NAME

							<u>DISCIPLINARY COMMITTEE ACTION</u>										<u>LOCAL APPEAL RESULTS</u>						
TAPE NO.	ODO C NO.	NAME (LAST, FIRST)	OFFENSE CODE	DATE OF OFFENSE	PLEA	HEARING DATE	FINDING	1st	AMT	\$US	2nd	AMT	\$US	3rd	AMT	\$US	APPEAL	1st	RESULT	2nd	RESULT	3rd	RESULT

- A. PLEA

0-NOT GUILTY

1-GUILTY

2-INFORMAL RESOLUTION
- B. FINDING

0-NOT GUILTY

1-GUILTY
- C. APPEAL

0-NO
- D. SANCTIONS IMPOSED

1-YES (See OPs for the digit code)

S-SUSPENDED
- E. AMOUNT

ENTER AMOUNT OF SANCTION IMPOSED (i.e. enter the number of days that are imposed)
- F. LOCAL APPEAL RIGHTS

1-AFFIRMED

2-MODIFY

3-DISMISSED

4-SUSPENDED

ORIGINAL: Director of Institutions or designee

COPIES: Evaluation and Analysis Unit

Facility File