

## PAROLE STIPULATION REPORT

FACILITY: \_\_\_\_\_ DATE: \_\_\_\_\_ PREPARED BY: \_\_\_\_\_

INMATE NAME: \_\_\_\_\_ ODOC NUMBER: \_\_\_\_\_

PAROLE DOCKET DATE: \_\_\_\_\_

PAROLE STIPULATION(S): \_\_\_\_\_

THE FOLLOWING INFORMATION PERTAINS TO THE ABOVE INMATE'S COMPLETION OF OR REMOVAL FROM THE PAROLE STIPULATION(S):

1. \_\_\_\_\_ WORK RELEASE/COMMUNITY LEVEL

Date Assigned to Program: \_\_\_\_\_ Projected Completion Date: \_\_\_\_\_

\* Date Removed from Work Release: \_\_\_\_\_ Reason: \_\_\_\_\_

2. \_\_\_\_\_ VO-TECH

Projected Completion Date: \_\_\_\_\_ Date Removed From Vo-tech: \_\_\_\_\_

Reason: \_\_\_\_\_

3. \_\_\_\_\_ GED

Date GED Test Passed: \_\_\_\_\_ \*Date Removed From GED: \_\_\_\_\_

Reason: \_\_\_\_\_

4. \_\_\_\_\_ SUBSTANCE ABUSE PROGRAM

Date Program was Started: \_\_\_\_\_ SAC Program: \_\_\_\_\_

Frequency of Attendance: \_\_\_\_\_ \*Date Removed From Program: \_\_\_\_\_

Reason: \_\_\_\_\_

5. \_\_\_\_\_ Other: \_\_\_\_\_

Projected Completion Date: \_\_\_\_\_ \*Date Removed From Program: \_\_\_\_\_

Reason: \_\_\_\_\_

6. \_\_\_\_\_ Other: \_\_\_\_\_

Projected Completion Date: \_\_\_\_\_ Date Removed From Program: \_\_\_\_\_

Reason: \_\_\_\_\_

7. \_\_\_\_\_ Other: \_\_\_\_\_

Projected Completion Date: \_\_\_\_\_ \*Date Removed From Program: \_\_\_\_\_

Reason: \_\_\_\_\_

**\* Attach program completion certificate, if applicable**

Original: Parole Unit

Copy: Field File, Section 5

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