

Administrative Caseload Checklist

Offender Name/ODOC Number: _____

Telephone Reporting System (TRS)

- _____ Information Acknowledgement, Attachment C
- _____ Restitution is current (supervision contact entry)
- _____ Assessed/Re-assessed LSI-R score: _____
- _____ Rap sheets requested, received and reviewed within the last 30 days and documented in ICON
- _____ Warrant check done within the last five days revealing no known outstanding warrants, including traffic
- _____ ICAOS progress reports are completed, if requested/applicable
- _____ Mailing address and telephone contact information confirmed and updated in ICON
- _____ "Statutory Termination Review for Continued Supervision on Suspended/Parole Cases" (OP-160201, Attachment H) completed, if applicable

Interstate Out

- _____ Transfer Request has been approved and reporting instructions have been given.
- _____ Notice of departure has been submitted and notice of arrival has been received.
- _____ Obtained reporting instructions from the receiving state through the Interstate Compact
- _____ RAP sheets requested, received and reviewed within the last 30 days and documented on ICON
- _____ Warrant check done within the last five days revealing no known outstanding warrants, including traffic
- _____ Case opened in ICON
- _____ All replies to any compact action request completed in ICOTS
- _____ "Statutory Termination Review for Continued Supervision on Suspended/Parole Cases" (OP-160201, Attachment H) completed, if applicable
- _____ Restitution and accounting notified of offender status

Absconder

- _____ Locator attempts have been made and documented as per policy
- _____ All violation and supplemental reports have been submitted as required
- _____ RAP sheets requested, received and reviewed within the last 30 days and documented in ICON
- _____ "Statutory Termination Review for Continued Supervision on Suspended/Parole Cases" (OP-160201, Attachment H) completed, if applicable

Incarcerated Probationer/Parolee/County Jail Placement

- _____ Appropriate violation and supplemental reports submitted as required
- _____ Name and location of facility where offender is housed is documented in ICON
- _____ Supervision contact indicating if offender has outstanding warrant(s), or if revocation is not pursued and offender's status will continue while incarcerated
- _____ "Statutory Termination Review for Continued Supervision on Suspended/Parole Cases" (OP-160201, Attachment H) completed, if applicable

Inactive Parole

- _____ RAP sheets requested, received and reviewed within the last 30 days and documented in ICON
- _____ "Inactive parole supervision notice" signed by parolee, and in ICON
- _____ Warrant check done within the last five days revealing no known outstanding warrants, including traffic

Officer/Date

Team Supervisor/Date