



Department of Corrections and Rehabilitation

**NOTICE OF CHANGE TO  
REGULATIONS**

**Sections: 3763 and 3767**

**Number:  
18-08**

**Publication Date:  
September 28, 2018**

**Effective Date:  
To Be Announced**

**INSTITUTION POSTING AND CERTIFICATION REQUIRED**

This notice announces proposed amendments to section 3763 and the adoption of new section 3767 of the California Code of Regulations (CCR), Title 15, Crime Prevention and Corrections, Division 3, to incorporate into the CCR provisions regarding flash incarceration of parolees.

**PUBLIC COMMENT PERIOD**

Any person may submit written comments about the proposed regulations by mail to the California Department of Corrections and Rehabilitation, Regulation and Policy Management Branch (RPMB), P.O. Box 942883, Sacramento, CA 94283-0001, or by e-mail to [RPMB@cdcr.ca.gov](mailto:RPMB@cdcr.ca.gov). All written comments must be received by the close of the public comment period **November 14, 2018**, at 5:00 p.m.

**PUBLIC HEARING INFORMATION**

A public hearing regarding these proposed regulations will be held **November 14, 2018, from 10:00 a.m. to 11:00 a.m. in Conference Room 100N, located at 1515 S Street, North Building, Sacramento, CA, 95811**. The purpose of the hearing is to receive comments about this action. It is not a forum to debate the proposed regulations. No decision regarding the permanent adoption of these regulations will be rendered at this hearing. Written comments submitted during the prescribed comment period are given the same significance and weight as verbal comments presented at the hearing. This hearing site is accessible to the mobility impaired.

**POSTING**

This Notice shall be posted immediately upon receipt at locations accessible to inmates, parolees, and employees in each Department facility and field office not later than five calendar days after receipt. Also, facilities shall make this Notice available for review by inmates in segregated housing who do not have access to the posted copies, and shall distribute it to inmate law libraries and advisory councils. Certification of Posting, CDCR Form 621-A (Rev. 04/18), shall be returned to the RPMB electronically by mail or email. See Department Operations Manual Sections 12010.12.1 and 12010.12.2 for posting and certification of posting procedures.

**CONTACT PERSON**

Inquiries regarding this notice should be directed to Josh Jugum, RPMB, by mail to California Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001, by telephone at (916) 445-2269, or e-mail to [RPMB@cdcr.ca.gov](mailto:RPMB@cdcr.ca.gov). Inquiries regarding the subject matter of these regulations may be directed to Charles Bell, Division of Adult Parole Operations, at (916) 324-9325.

*Original Signed By:*

RALPH M. DIAZ  
Secretary (A)  
California Department of Corrections and Rehabilitation

Attachments

## NOTICE OF PROPOSED REGULATIONS

### California Code of Regulations Title 15, Crime Prevention and Corrections Department of Corrections and Rehabilitation

**NOTICE IS HEREBY GIVEN** that the Secretary of the California Department of Corrections and Rehabilitation (CDCR) proposes to amend Section 3763, and adopt new Section 3767, of the California Code of Regulations, Title 15, concerning flash incarceration of parolees.

#### **PUBLIC HEARING:**

Date and Time: **November 14, 2018 - 10:00 a.m. to 11:00 a.m.**

Place: California Department of Corrections and Rehabilitation  
Conference Room 100N  
1515 S Street, North Building  
Sacramento, CA 95811

Purpose: To receive comments about this action.

#### **PUBLIC COMMENT PERIOD:**

The public comment period will close **November 14, 2018, at 5:00 p.m.** Any person may submit written comments by mail addressed to the primary contact person listed below, or by email to [rpmb@cdcr.ca.gov](mailto:rpmb@cdcr.ca.gov), before the close of the comment period. For questions regarding the subject matter of the regulations, call the program contact person listed below.

#### **CONTACT PERSONS:**

<u>Primary Contact</u>	<u>Back-Up</u>	<u>Program Contact</u>
Josh Jugum	Y. Sun	C. Bell
Telephone: (916) 445-2228	Telephone: (916) 445-2269	Division of Adult Parole Operations
Regulation and Policy Management Branch	Regulation and Policy Management Branch	(916) 324-9325
P.O. Box 942883	P.O. Box 942883	
Sacramento, CA 94283-0001	Sacramento, CA 94283-0001	

#### **AUTHORITY AND REFERENCE:**

**Government Code Section 12838.5** provides that commencing July 1, 2005, CDCR succeeds to, and is vested with, all the powers, functions, duties, responsibilities, obligations, liabilities, and jurisdiction of abolished predecessor entities, such as: Department of Corrections, Department of the Youth Authority, and Board of Corrections.

**Penal Code (PC) Section 5000** provides that commencing July 1, 2005, any reference to Department of Corrections in this or any code, refers to the CDCR, Division of Adult Operations.

**PC Section 5050** provides that commencing July 1, 2005, any reference to the Director of Corrections in this or any other code, refers to the Secretary of the CDCR. As of that date, the office of the Director of Corrections is abolished.

**PC Section 5054** provides that commencing July 1, 2005, the supervision, management, and control of the State prisons, and the responsibility for the care, custody, treatment, training, discipline, and employment of persons confined therein are vested in the Secretary of the CDCR.

**PC Section 5055** provides that commencing July 1, 2005, all powers and duties previously granted to and imposed upon the Department of Corrections shall be exercised by the Secretary of the CDCR.

**PC Section 5058** authorizes the Director to prescribe and amend rules and regulations for the administration of prisons and for the administration of the parole of persons.

**INFORMATIVE DIGEST / POLICY STATEMENT OVERVIEW:**

Effective July 1, 2013, Assembly Bill 117, Criminal Justice Realignment, added flash incarceration under Penal Code (PC) Section 3000.08(e). Flash incarceration is a period of detention, between one and ten consecutive days, in a city or a county jail due to a violation of a parolee's conditions of parole.

**This action will:**

- Establish the Department's authority to impose upon parolees a period of incarceration of up to 10 days in a county jail, as a remedial sanction for a parole violation, pursuant to statute.
- Establish a limit, with specified exceptions, of three flash incarceration periods during the term of parole.
- Update specified Department forms.

**FORMS INCORPORATED BY REFERENCE:**

CDCR Form 1676 (Rev. 04/13), Parole Violation Report  
CDCR Form 1502-B (Rev. 05/15), Probable Cause Determination  
CDCR Form 2278 (Rev. 06/18), Arrest Report

**SPECIFIC BENEFITS ANTICIPATED BY THE PROPOSED REGULATIONS**

The safety of California residents may be enhanced through improved parole supervision that allows for short periods of local incarceration for minor parole violations, rather than revocation of parole and return to prison, which may be beneficial for the rehabilitation of parolees.

**EVALUATION OF CONSISTENCY / COMPATIBILITY WITH EXISTING LAWS AND REGULATIONS**

Pursuant to Government Code 11346.5(a)(3)(D), the Department has determined the proposed regulations are not inconsistent or incompatible with existing regulations. After conducting a review, the Department has concluded that these are the only regulations that concern flash incarceration of parolees.

**LOCAL MANDATES:**

This action imposes no mandates on local agencies or school districts, or a mandate which requires reimbursement of costs or savings pursuant to Government Code Sections 17500 - 17630.

**FISCAL IMPACT STATEMENT:**

- Cost or savings to any state agency: *None*
- Cost to any local agency or school district that is required to be reimbursed: *None*
- Other nondiscretionary cost or savings imposed on local agencies: *None*
- Cost or savings in federal funding to the state: *None*

**EFFECT ON HOUSING COSTS:**

The Department has made an initial determination that the proposed action will have no significant effect on housing costs.

**COST IMPACTS ON REPRESENTATIVE PRIVATE PERSONS OR BUSINESSES:**

The Department is not aware of any cost impacts that a representative private person or business would necessarily incur in reasonable compliance with the proposed action.

**SIGNIFICANT STATEWIDE ADVERSE ECONOMIC IMPACT ON BUSINESS:**

The Department has made an initial determination that the proposed regulations will not have a significant statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states, because the proposed regulations place no obligations or requirements on any business.

**EFFECT ON SMALL BUSINESSES:**

The Department has determined that the proposed regulations will not affect small businesses. This action has no significant adverse economic impact on small business because they place no obligations or requirements on any business.

**RESULTS OF THE ECONOMIC IMPACT ASSESSMENT:**

The Department has determined that the proposed regulation will have no effect on the creation of new, or the elimination of existing, jobs or businesses within California, or effect the expansion of businesses currently doing business in California.

The Department has determined that the proposed regulation will have no effect on worker safety or the state's environment.

The Department has determined that the proposed regulations may benefit the welfare of California residents by improving rehabilitative outcomes for parolees.

**CONSIDERATION OF ALTERNATIVES:**

The Department must determine that no reasonable alternative considered by the Department or that has otherwise been identified and brought to the attention of the Department would be more effective in carrying out the purpose for which the action is proposed, would be as effective and less burdensome to affected private persons than the proposed regulatory action, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provisions of law. Interested persons are invited to present statements or arguments with respect to any alternatives to the changes proposed at the scheduled hearing or during the written comment period.

**AVAILABILITY OF PROPOSED TEXT AND INITIAL STATEMENT OF REASONS:**

The Department has prepared and will make available the text and the Initial Statement of Reasons (ISOR) of the proposed regulations. The rulemaking file for this regulatory action, which contains those items and all information on which the proposal is based (i.e., rulemaking file) is available to the public upon request directed to the Department's contact person. The proposed text, ISOR, and Notice of Proposed Action will also be made available on the Department's website: [www.cdcr.ca.gov](http://www.cdcr.ca.gov).

**AVAILABILITY OF THE FINAL STATEMENT OF REASONS:**

Following its preparation, a copy of the Final Statement of Reasons may be obtained from the Department's contact person.

**AVAILABILITY OF CHANGES TO PROPOSED TEXT:**

After considering all timely and relevant comments received, the Department may adopt the proposed regulations substantially as described in this Notice. If the Department makes modifications which are sufficiently related to the originally proposed text, it will make the modified text, with the changes clearly indicated, available to the public for at least 15 days before the Department adopts, amends or repeals the regulations as revised. Requests

for copies of any modified regulation text should be directed to the contact person indicated in this Notice. The Department will accept written comments on the modified regulations for at least 15 days after the date on which they are made available.

## TEXT OF PROPOSED REGULATIONS

In the following text, ~~strikethrough~~ indicates deleted text; underline indicates added text.

### California Code of Regulations, Title 15, Division 3, Adult Institutions, Programs, and Parole

The title of Subchapter 6, Article 19 is amended.

#### Subchapter 6, Article 19. Parole Violations, Flash Incarcerations, and Reports

##### 3763. Petition for Revocation.

###### Section 3763(a) is amended:

Judicial Council of California Form CR 300 (Rev. 01/15), Petition for Revocation, which is incorporated by reference, or the unique court form established by a court for this purpose in a particular county, shall be utilized by the parole agent for submitting a recommendation for revocation of parole to the court.

(a) The parole agent shall submit the Form CR 300, or the unique court form established by a court for this purpose in a particular county, with the following attachments:

- (1) CDCR Form 1676 (Rev. 04/13), Parole Violation Report
- (2) CDCR Form 1502-B (Rev. 05/15), Probable Cause Determination
- (3) CDCR Form 1521-B (Rev. 04/13), Criminal History, which is incorporated by reference
- (4) CDCR Form 1244 (Rev. 4/13), Parole Violation History, which is incorporated by reference
- (5) CDCR Form 1515 (Rev. 04/14), Notice and Conditions of Parole
- (6) A printed copy of the completed automated CDCR 1515-Addendum (~~Rev. 04/13~~), Special Conditions of Parole, ~~which is incorporated by reference.~~

###### Section 3763 (b) is amended:

(b) When appropriate, the parole agent shall file a petition for prosecution with the local district attorney's office, utilizing the CDCR Form 2278 (Rev. 04/14 06/18), Arrest Report, which is incorporated by reference, in addition to the documents described in Section 3763(a).

NOTE: Authority cited: Sections 5058 and 5058.3, Penal Code. Reference: Sections 1203.2, 3000.08(a), 3052, 3053, 3063, 5054 and 5076.2, Penal Code.

**New Section 3767 is adopted.**

##### 3767. Flash Incarcerations.

(a) The California Department of Corrections and Rehabilitation (CDCR) has the authority to impose a period of flash incarceration, as defined in Penal Code Section 3000.08(e), in a city or county jail as a remedial sanction upon parolees who violate conditions of parole. Flash incarceration periods imposed by the Department shall not exceed 10 consecutive days. During

a period of flash incarceration, the parolee is not revoked and their parole period shall continue to run untolled (i.e., the period of parole will continue to be reduced on a day-to-day basis).

(b) Upon placement of a parole hold, and subsequent investigation, the parole agent may recommend to the unit supervisor a parolee serve a period of flash incarceration as a remedial sanction in lieu of revocation. The parole agent shall complete an automated CDCR Form 1500, Parole Violation Decision Making Instrument, in the Parole Violation Disposition Tracking System to make the recommendation. Upon such recommendation, the parole agent shall also utilize the CDCR Form 1500 to recommend at least one additional remedial sanction to address the parolee's criminogenic need(s) as defined in Section 3000.

(c) Upon review and approval of a recommendation for flash incarceration on a CDCR Form 1500 by a unit supervisor or higher, the parolee shall serve a period of flash incarceration not to exceed 10 consecutive days from the day of arrest.

(1) Notification of the reasons for the detention shall be made to the parolee by the Department in accordance with Section 3754.

(2) For purposes of calculating a flash incarceration period, the day of booking into a city or county jail shall count as day one.

(d) The Department shall not impose more than three flash incarcerations as a sanction upon a parolee during his or her term of parole. An exception to this limit shall be made upon a petition for parole revocation being filed with the court. Upon every petition for parole revocation filed with the court regarding the parolee, the three options for flash incarceration shall reset and be made available for use by the Department.

(e) Once released from custody, the parolee shall report to the parole office to meet with a parole agent on the first business day following release. Upon reporting, the parole agent shall implement the remedial sanction(s) imposed in conjunction with the flash incarceration.

Note: Authority cited: Section 5054, Penal Code. Reference: Section 3000.08, Penal Code.



ATTACHMENT 1  
PVDTS#: \_\_\_\_\_

CDC #	PAROLEE NAME (LAST, FIRST, MI)	PAROLE UNIT	REGION	AGENT OF RECORD
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4. VIOLATION AND CIRCUMSTANCES OF CHARGE(S):

5. VIOLATION AND CIRCUMSTANCES OF CHARGE(S):

6. VIOLATION AND CIRCUMSTANCES OF CHARGE(S):

PAROLEE STATEMENT:

ATTACHMENT 1

PVDTS#: \_\_\_\_\_

CDC #	PAROLEE NAME (LAST, FIRST, MI)	PAROLE UNIT	REGION	AGENT OF RECORD
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1. <input type="checkbox"/> WITNESS <input type="checkbox"/> VICTIM				
NAME	ADDRESS	TELEPHONE	BADGE # <input type="checkbox"/> N/A	SENSITIVE WITNESS <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> FEARFUL <input type="checkbox"/> MINOR/JUVENILE

(1) WITNESS/VICTIM STATEMENT:

2. <input type="checkbox"/> WITNESS <input type="checkbox"/> VICTIM				
NAME	ADDRESS	TELEPHONE	BADGE # <input type="checkbox"/> N/A	SENSITIVE WITNESS <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> FEARFUL <input type="checkbox"/> MINOR/JUVENILE

(2) WITNESS/VICTIM STATEMENT:

3. <input type="checkbox"/> WITNESS <input type="checkbox"/> VICTIM				
NAME	ADDRESS	TELEPHONE	BADGE # <input type="checkbox"/> N/A	SENSITIVE WITNESS <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> FEARFUL <input type="checkbox"/> MINOR/JUVENILE

(3) WITNESS/VICTIM STATEMENT:

4. <input type="checkbox"/> WITNESS <input type="checkbox"/> VICTIM				
NAME	ADDRESS	TELEPHONE	BADGE # <input type="checkbox"/> N/A	SENSITIVE WITNESS <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> FEARFUL <input type="checkbox"/> MINOR/JUVENILE

(4) WITNESS/VICTIM STATEMENT:

ATTACHMENT 1  
PVDTS#: \_\_\_\_\_

CDC #	PAROLEE NAME (LAST, FIRST, MI)	PAROLE UNIT	REGION	AGENT OF RECORD
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5. <input type="checkbox"/> WITNESS <input type="checkbox"/> VICTIM				
NAME	ADDRESS	TELEPHONE	BADGE # <input type="checkbox"/> N/A	SENSITIVE WITNESS <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> FEARFUL <input type="checkbox"/> MINOR/JUVENILE

(5) WITNESS/VICTIM STATEMENT:

NARRATIVE CONTINUED FROM PAGE \_\_\_\_\_:

COURT STATUS:

EVALUATION:

ATTACHMENT 1  
 PVDTS#: \_\_\_\_\_

CDC #	PAROLEE NAME (LAST, FIRST, MI)	PAROLE UNIT	REGION	AGENT OF RECORD
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**RECOMMENDATION FROM SUPERVISING AGENCY**

EVIDENCE BASED TOOL USED FOR RECOMMENDATION: PAROLE VIOLATION DECISION MAKING INSTRUMENT [PVDMI]

INSTRUMENT RECOMMENDED RESPONSE LEVEL:

LEAST TO MOST INTENSIVE: CONTINUE ON PAROLE WITH REMEDIAL SANCTIONS       MOST INTENSIVE: REFER FOR REVOCATION

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION RECOMMENDED RESPONSE LEVEL:

PETITION FOR REVOCATION DUE TO PAROLEE'S FAILURE TO COMPLY WITH HIS OR HER CONDITIONS OF PAROLE OR INVOLVEMENT IN CRIMINAL BEHAVIOR.

RECOMMENDATION: RETURN TO CUSTODY FOR \_\_\_\_ DAYS.

*I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.*

PAROLE AGENT NAME	SIGNATURE	DATE
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SUPERVISOR NAME	SIGNATURE	DATE
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**ADOPT**

PVDTs #: \_\_\_\_\_

CDC NUMBER	PAROLEE NAME (LAST, FIRST, MI)				PAROLE UNIT	REGION	AGENT OF RECORD	
AGE	DATE OF BIRTH		SEX <input type="checkbox"/> M <input type="checkbox"/> F	RACE	HEIGHT	WEIGHT	EYES	HAIR
LAST KNOWN ADDRESS			RESIDENTIAL PATTERN <input type="checkbox"/> STABLE <input type="checkbox"/> UNSTABLE <input type="checkbox"/> TRANSIENT		CONTROLLING DISCHARGE DATE		LIFE-TERM PAROLEE PC 3000.1 <input type="checkbox"/> YES <input type="checkbox"/> NO	
ARREST DATE		HOLD DATE	HOLD REMOVED DATE		COUNTY IDENTIFIER			
ARRESTING AGENCY		NAME BOOKED AS		BOOKING NUMBER		BOOKING LOCATION		
<b>REASON FOR RETAINING PAROLE HOLD: PAROLEE DANGER TO:</b> <input type="checkbox"/> ABSCOND <input type="checkbox"/> PROPERTY OTHERS <input type="checkbox"/> SAFETY OTHERS								
<b>COMMITMENT OFFENSE(S):</b>								
OFFENSE CODE			OFFENSE DESCRIPTION			CONTROLLING OFFENSE		
DECS CHECKED? <input type="checkbox"/> YES DISABILITY/EFFECTIVE COMMUNICATION SYSTEM (DECS) INFORMATION:								
VIOLATION 1: CIRCUMSTANCES OF CHARGE:								
VIOLATION 2: CIRCUMSTANCES OF CHARGE:								
VIOLATION 3: CIRCUMSTANCES OF CHARGE:								

PVDTS #: \_\_\_\_\_

**VIOLATION 4:**  
**CIRCUMSTANCES OF CHARGE:**

**COURT STATUS:**

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.

PAROLE AGENT NAME	ELECTRONIC SIGNATURE	DATE
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**UNIT SUPERVISOR'S ACTION:**

- DECISION       REVIEW       RETAIN HOLD       RELEASE HOLD (DATE): \_\_\_\_\_
- CONTINUE ON PAROLE       DISMISS CHARGES
- DEFER - CRIMINAL CHARGES FILED       DEFER - DISTRICT ATTORNEY PETITION FOR REVOCATION FILED
- INVESTIGATE - SUBMIT APPROPRIATE REPORT BY (DATE): \_\_\_\_\_

SPECIAL CONDITIONS:

**UNIT SUPERVISOR COMMENTS/RECOMMENDATION:**

UNIT SUPERVISOR NAME	ELECTRONIC SIGNATURE	DATE
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DELETE

RED TEXT DOES NOT PRINT

ATTACHMENT 4  
PVDTS #:

CDC NUMBER	PAROLEE NAME (LAST, FIRST, MI)			PAROLE UNIT	REGION / AGENT OF RECORD		
AGE	DOB	SEX <input type="checkbox"/> M <input type="checkbox"/> F	RACE	HEIGHT	WEIGHT	EYES	HAIR
LAST KNOWN ADDRESS			RESIDENTIAL PATTERN DROP DOWN LIST - PICK ONE STABLE / UNSTABLE / TRANSIENT	CONTROLLING DISCHARGE DATE	LIFE-TERM PAROLEE PC 3000.1 <input type="checkbox"/> YES <input type="checkbox"/> NO		
ARREST DATE	HOLD DATE		HOLD REMOVED DATE		COUNTY IDENTIFIER		
ARRESTING AGENCY	NAME BOOKED AS		BOOKING NUMBER		BOOKING LOCATION		

DEC SYSTEM CHECKED?  YES (Once yes is selected, this line of text will not show)  
DISABILITY / EFFECTIVE COMMUNICATION (DEC) INFORMATION:

VIOLATION(S):  ADD  DELETE

CIRCUMSTANCES OF CHARGE(S):

COURT STATUS:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PAROLE AGENT NAME	ELECTRONIC SIGNATURE	DATE
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UNIT SUPERVISOR'S ACTION:

DECISION     REVIEW     RETAIN HOLD     RELEASE HOLD - (DATE): \_\_\_\_\_  
 CONTINUE ON PAROLE  
 INVESTIGATE - SUBMIT APPROPRIATE REPORT BY (DATE): \_\_\_\_\_  
 SPECIAL CONDITIONS:  ADD  DELETE

UNIT SUPERVISOR COMMENTS / RECOMMENDATION:

UNIT SUPERVISOR NAME	ELECTRONIC SIGNATURE	DATE
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1515 ADDENDUM **Special Conditions**Placed By\*:  

Multiple Choices	Special Conditions	Reasons
<b>COURT IMPOSED</b>		
<input type="checkbox"/>	001. You shall abide by any court imposed Special Conditions of Parole.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<b>SUBSTANCE ABUSE</b>		
<input type="checkbox"/>	002. You shall submit to urinalysis testing when instructed to do so by a parole agent.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	003. You shall not consume, possess or have access to any alcoholic beverages, liquors, or over-the-counter medication that contains alcohol; (e.g., Nyquil). You shall provide a urine or breath sample for the purpose of detecting the presence of alcohol.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	004. You shall not enter a business whose primary purpose is to sell or serve alcoholic beverages.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	005. You shall not use, possess, or distribute any narcotic or other controlled substance as defined by law or any paraphernalia related to such substances, without a valid prescription.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	006. You shall enroll in and successfully complete a substance abuse treatment program as directed by your parole agent or appropriate parole authority.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<b>TREATMENT</b>		
<input type="checkbox"/>	007. You shall attend Parole Outpatient Clinic (POC) for an initial evaluation and remain in that treatment program as deemed necessary by a Parole Outpatient Clinic clinician.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	008. You shall participate in a mental health treatment program as directed by your parole agent.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	009. You shall submit to psychological or physiological assessments to assist in treatment planning and/or parole supervision.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	010. You shall report to, and actively participate in a Division of Adult Parole Operations approved treatment program specific to sex offenders.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	011. You hereby agree to polygraph examinations while on parole supervision, with the questioning limited to questions about the success of the sex offender treatment program, the crimes(s) for which you were convicted, and related criminal behavior, whether past or future.	<input type="checkbox"/>  Click icon to enter Reason Comment 
<input type="checkbox"/>	012. You agree to and will sign any necessary documents including a waiver of psychotherapist-patient privilege to allow full communication between your sex offender management professional and your parole agent as required by Penal Code (PC) Section 3008 (d)(4) and PC Section 290.09.	<input type="checkbox"/>  Click icon to enter Reason Comment 

<input type="checkbox"/>	013. Upon reporting to sex offender treatment, you shall sign the forms presented by the treatment provider, including an information release form and a "Consent to Polygraph" form.	 Click icon to enter Reason Comment	
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**CONTACT WITH MINORS**

<input type="checkbox"/>	014. You shall not have contact with any minor male/female you know or reasonably should know is under the age of 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological or adopted children.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	015. You shall not have any contact with any minor male/female you know or reasonably should know is between the ages of 13 and 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological or adopted children.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	016. You shall not have contact with your biological or adopted children. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, through electronic media, email, computer, or through another person, etc.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	017. You shall immediately inform your parole agent regarding any contact with a minor. This includes "Accidental" or "Incidental" contact.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	018. You shall not enter or loiter within 250 feet of the perimeter of places where children congregate; e.g., day care centers, schools, parks, playgrounds, video arcades, swimming pools, state fairgrounds, county fairgrounds, etc.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	019. You shall not enter any school building or school grounds (kindergarten and grades 1 to 12, inclusive) unless for lawful business and written permission, indicating the dates and time, has been granted from the chief administrative official of the school.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	020. You shall not enter any park where children regularly gather without prior written approval from your parole agent. The written approval must be kept with you while you are in the park.	 Click icon to enter Reason Comment	
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**RELATIONSHIPS**

<input type="checkbox"/>	021. You shall not date, socialize or form a romantic interest or sexual relationship with any person who has physical custody of a minor.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	022. You shall inform all persons with whom you have a significant relationship; e.g., employer, dating, or roommate, about your criminal history, and you will inform your parole agent about the relationship.	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	023. You shall inform all persons with whom you have a sexual or romantic relationship, that you have been diagnosed as having a communicable disease.	 Click icon to enter Reason Comment	
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**VICTIM(S)**

<input type="checkbox"/>	024. You shall not enter the premises, unnecessarily travel past, or loiter near where your victim(s) _____ frequents, resides, is employed, or attends classes. 	 Click icon to enter Reason Comment	
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<input type="checkbox"/>	025. You shall not contact or attempt to contact 		
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<input type="checkbox"/>	your crime victim(s): _____ or their immediate families. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	026. You shall not threaten, stalk, abuse, harass, or commit further violent acts against the victim(s) _____.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	027. You shall not have in your possession any of your victim(s) _____ personal effects; e.g., pictures, letters, etc.	 Click icon to enter Reason Comment 

**ASSOCIATION**

<input type="checkbox"/>	028. You shall not associate with any known sex offenders except as previously approved or instructed by your parole agent.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	029. You shall not have contact with co-defendants or other arrestees of your offenses. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc.	 Click icon to enter Reason Comment 

**TRAVEL**

<input type="checkbox"/>	030. You shall not travel more than _____ miles from your residence of record.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	031. You shall maintain and have in your possession a travel log, which shall include date and time of departure, destination, time of arrival, mileage, route taken, with whom, and include daily starting and ending mileage.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	032. You shall not hitchhike or pick up hitchhikers.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	033. You shall not enter or loiter within 100 yards of areas of sexual or pornographic activity; e.g., adult bookstores, massage parlors, nude or topless bars, sex shops, etc.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	034. You shall notify your parole agent in advance of operating any motor vehicle, giving the make, model, year, color, and license number.	 Click icon to enter Reason Comment 

**EMPLOYMENT**

<input type="checkbox"/>	035. Employment shall be pre-approved by your parole agent.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	036. You shall not obtain employment that allows you to enter a residence where a stranger resides.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	037. Volunteer work shall be preapproved by your parole agent.	 Click icon to enter Reason Comment 

**RESIDENCE**

<input type="checkbox"/>	038. You shall not reside in a residence with any person also required to register pursuant to PC Section 290, unless he or she is legally related to you by blood, marriage, or adoption. This does not include treatment programs and/or board and care facilities with the appropriate use permit.	 Click icon to enter Reason Comment 
<input type="checkbox"/>	039. You shall not reside within one-half mile of any	

<input type="checkbox"/> public or private school (kindergarten and grades 1 through 12, inclusive) pursuant to PC Section 3003(g).	 Click icon to enter Reason Comment 
<input type="checkbox"/> 040. You shall not reside within _____ feet of any public or private school (kindergarten and grades 1 through 12, inclusive). 	 Click icon to enter Reason Comment 
<input type="checkbox"/> 041. You shall not reside within _____ feet of any parks where children regularly congregate. 	 Click icon to enter Reason Comment 
<input type="checkbox"/> 042. You shall not reside in the county of _____ 	 Click icon to enter Reason Comment 
<input type="checkbox"/> 043. You shall be in your approved residence from _____ p.m. to _____ a.m. 	 Click icon to enter Reason Comment 
<input type="checkbox"/> 044. You shall not establish a residence that has not been preapproved by your parole agent.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 045. You shall not reside within 35 miles of your victim.	 Click icon to enter Reason Comment 
<b>POSSESSIONS</b>	
<input type="checkbox"/> 046. You shall not possess, or have access to any sexually oriented or sexually stimulating objects and/or devices.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 047. You shall not view, possess, or have access to any pornographic material; e.g., movies, photographs, drawings, literature, etc.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 048. You shall not view, possess, or have access to any material; e.g., periodicals, newspapers, magazines, catalogs, that depict adults or children in undergarments, nude, partially nude, etc.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 049. You shall not possess or have access to sexually oriented devices, handcuffs, handcuff keys, restraint equipment, or any other items that could be used for bondage, restraint, control, or confinement.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 50. You shall not possess or have access to childrens clothing, toys, games, or other similar material related to children's interests.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 051. You shall not possess any household pets or animals including animals not traditionally considered household pets; e.g., snakes, lizards, gerbils, farm animals, etc.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 052. You shall not use or possess law enforcement identification, insignia, badges, uniforms, or other items identified with law enforcement.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 053. You shall not use, possess, or have access to surveillance equipment.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 054. You shall not use, possess, or have access to police radio scanners, or other telecommunications device(s) which monitor police radio transmission.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 055. You shall not wear, possess, purchase, or have access to costumes, masks, or other identity-concealing items.	 Click icon to enter Reason Comment 
<input type="checkbox"/> 056. You shall not use or have access to a post office box, safe deposit box, storage facility, or locker.	 Click icon to enter Reason Comment 



	except when showering or sleeping. When showering or sleeping, you must keep the device within reach of your person.	Click icon to enter Reason Comment
	071. You shall observe a _____ a.m. / p.m. to _____ a.m. / p.m. curfew and remain within your approved residence.	Click icon to enter Reason Comment
	072. You shall charge the GPS device at least two times per day (every 12 hours). Charge the device at _____ a.m. for at least 1 full hour. Charge the device at _____ p.m. for at least 1 full hour.	Click icon to enter Reason Comment
	073. You shall charge the GPS device at least two times per day (every 12 hours) for at least 1 full hour for each charging time.	Click icon to enter Reason Comment
	074. You shall not tamper with the device or cover the device with any material that you know or reasonably should know will interfere with the GPS signal.	Click icon to enter Reason Comment
	075. You shall contact your parole agent immediately if and when the device vibrates and/or makes an audible tone (beep).	Click icon to enter Reason Comment
	076. You shall not expose the device to extreme temperatures or place it under water; e.g., pool, hot tub, bath, etc.	Click icon to enter Reason Comment
<b>PC SECTION 290 TRANSIENT</b>		
	077. If you are transient, you shall register as a transient and comply with all transient registration requirements pursuant to PC Section 290.011.	Click icon to enter Reason Comment
	078. If you are transient, you shall contact your parole agent by telephone between the hours of _____ a.m. and _____ p.m. on day (s) _____.	Click icon to enter Reason Comment
	079. If you are transient, you shall report to the following destination: _____ on day(s) _____.	Click icon to enter Reason Comment
<b>COMPUTER USE AND ELECTRONIC MEDIA</b>		
	080. You shall not have access to or use a personal computer and peripheral devices; e.g., printer, scanner, camera, storage devices, etc.	Click icon to enter Reason Comment
	081. You shall not use or possess cameras, cell phones that include a camera, video cameras, or photography equipment of any kind.	Click icon to enter Reason Comment
	082. You shall not use or possess a cell phone of any kind.	Click icon to enter Reason Comment
	083. You shall agree to install, or allow to be installed at your own expense, equipment and/or software to monitor or limit computer use.	Click icon to enter Reason Comment
	084. You shall not use or access social media sites, social networking sites, peer-to-peer networks, or computer or cellular instant message systems; e.g., Facebook, Instagram, Twitter, Snapchat, Lync, Gmail, Yahoo, KIK Messenger, Tumblr, etc. This would include any site which allows the user to have the ability to navigate the internet undetected.	Click icon to enter Reason Comment
	085. You shall not use the computer for any purpose which might further sexual activity; e.g., possession of	

sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.

  
Click icon to enter Reason Comment



086. You shall not use the computer for any purpose which might further sexual activity involving minor children; (e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content).

  
Click icon to enter Reason Comment



087. You shall not possess or view certain materials related to, or part of, the grooming cycle for your crime, e.g., images of your victim, stories or images related to your crime or similar crimes, images which depict individuals similar to your victims, (e.g., children, stories written about or for individuals similar to your victim); or materials focused on the culture of your victim, (e.g., children's shows or web sites).

  
Click icon to enter Reason Comment



088. You shall not use any method to hide or prevent unauthorized users from viewing specific data or files, (e.g., encryption, cryptography, steganography, compression, or password protected files). Log in and password information shall be provided to your parole agent upon request.

  
Click icon to enter Reason Comment



089. You shall not alter or destroy records of computer use; e.g., delete or remove browser history data, possess software or items designed to boot into the computer memory, alter or "wipe" computer media, defeat forensic software, block monitoring software, restore a computer to a previous state, or reinstall operating systems, etc.

  
Click icon to enter Reason Comment



090. You shall consent to announced or unannounced examination and/or search of electronic devices to which you have access for the limited purpose of detecting content prohibited by your conditions of parole or court order; e.g., hard disks, DVDs, CDs, zip disks, floppy disks, thumb drives, and/or any other storage media whether installed within a device or removable and separate from the actual computer device.

  
Click icon to enter Reason Comment



091. You shall not view, possess, or have access to programming for the purpose of viewing sexually explicit programming through televisions or any type of monitor.

  
Click icon to enter Reason Comment



092. You shall not view, possess, or have access to electronic media that depicts sexually explicit content.

  
Click icon to enter Reason Comment



## OTHER

093. You shall not place or answer any type of classified personal advertisement seeking or soliciting a relationship with a stranger.

  
Click icon to enter Reason Comment



094. You shall not use or access any telephone

<p>numbers designed for sexual arousal or stimulation.</p>	<p> Click icon to enter Reason Comment </p>
<p>095. You shall not use any fictitious names or change your name in an attempt to conceal your true identity or establish another identity.</p>	<p> Click icon to enter Reason Comment </p>
<p>096. If you spend the night away from your residence of record, you shall notify your parole agent in advance. You shall provide all contact information, including the address and the telephone number.</p>	<p> Click icon to enter Reason Comment </p>
<p>097. You shall not loiter (to delay, to linger, or to idle about) or be in the vicinity of:  _____</p>	<p> Click icon to enter Reason Comment </p>
<p>098. Unless you are a resident, you shall not enter or remain on the grounds of a day care or residential facility where elders or dependent adults are regularly present or living (PC Section 653c).</p>	<p> Click icon to enter Reason Comment </p>
<p>099. You shall not use any public shower facility, join any health club, physical fitness training facility, or sports club.</p>	<p> Click icon to enter Reason Comment </p>
<p>100. You shall wear clothing so as not to expose your genitals, breasts, or buttocks.</p>	<p> Click icon to enter Reason Comment </p>
<p>101. You shall contact your parole agent within 24 hours of any type of law enforcement contact; e.g., traffic stop, identification check, suspect, witness, etc.</p>	<p> Click icon to enter Reason Comment </p>
<p>102. You shall have your updated PC Section 290 registration verification with you at all times. You must present it during any contact or interaction with any law enforcement officer.</p>	<p> Click icon to enter Reason Comment </p>
<p>103. You shall observe a _____ a.m./p.m. to _____ a.m./p.m. curfew on Halloween and remain within your approved residence. </p>	<p> Click icon to enter Reason Comment </p>
<p>104. You shall/shall not: _____ </p>	<p> Click icon to enter Reason Comment </p>
<p>105. You shall/shall not: _____ </p>	<p> Click icon to enter Reason Comment </p>
<p>106. Other information: _____ </p>	<p> Click icon to enter Reason Comment </p>
<p>107. Other information: _____ </p>	<p> Click icon to enter Reason Comment </p>
<p>108. Other information: _____ </p>	<p> Click icon to enter Reason Comment </p>

Add

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DELETE

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

You shall comply with all of the following Special Conditions while you are on parole. Any exceptions must be approved in writing by the Unit Supervisor.

**COURT IMPOSED**

	REASON	INITIAL
1. You shall abide by any court imposed Special Conditions of Parole.		

**SUBSTANCE ABUSE**

	REASON	INITIAL
2. You shall provide an anti-narcotic test when instructed to do so by a parole agent.		
3. You shall not consume, possess, or have access to any alcoholic beverages, liquors, or over-the-counter medication that contains alcohol; (e.g., Nyquil). You shall provide a urine or breath sample for the purpose of detecting the presence of alcohol.		
4. You shall not enter a business whose primary purpose is to sell or serve alcoholic beverages.		
5. You shall not use, possess, or distribute any narcotic or other controlled substance as defined by law or any paraphernalia related to such substances, without a valid prescription.		
6. You shall enroll in and successfully complete a substance abuse treatment program as directed by your parole agent or appropriate parole authority.		

**TREATMENT**

	REASON	INITIAL
7. You shall attend Parole Outpatient Clinic (POC) for an initial evaluation and remain in the mental health treatment program as deemed necessary by a POC clinician.		
8. You shall participate in a mental health treatment program as directed by your parole agent.		
9. You shall submit to psychological or physiological assessments to assist in treatment planning and/or parole supervision.		
10. You shall actively participate in a DAPO approved treatment program specific to Sex Offenders.		
11. You shall report to, enroll in, and actively participate in outpatient sex offender treatment.		
12. You hereby agree to waive psychotherapist-patient privilege, and agree to polygraph examinations while in treatment during parole.		
13. Upon reporting to outpatient sex offender treatment, you shall sign forms presented by the treatment providers, including an information release form and a "Consent to Polygraph" form.		

**CONTACT WITH MINORS**

	REASON	INITIAL
14. You shall not have contact with any minor male/female you know or reasonably should know is under the age of 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological children.		
15. You shall not have any contact with any minor male/female you know or reasonably should know is between the ages of 13 and 18. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc., excluding biological children.		
16. You shall not have contact with your biological or adopted children. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, in writing, through electronic media, e-mail, computer, or through another person, etc.		
17. You shall immediately inform your parole agent regarding any contact with a minor. This includes "accidental" or "incidental" contact.		
18. You shall not enter or loiter within 250 Feet of the perimeter of places where children congregate; e.g., day care centers, schools, parks, playgrounds, video arcades, swimming pools, state fairgrounds, county fairgrounds, etc.		

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

	REASON	INITIAL
19. You shall not enter any park where children regularly gather without prior written approval from your parole agent. The written approval must be kept with you while you are in the park.		

**RELATIONSHIPS**

	REASON	INITIAL
20. You shall not date, socialize or form a romantic interest or sexual relationship with any person who has physical custody of a minor.		
21. You shall inform all persons with whom you have a significant relationship (e.g., employer, dating, roommate) about your criminal history, and you will inform your parole agent about the relationship.		
22. You shall inform all persons with whom you have a sexual or romantic relationship, that you have been diagnosed as having a communicable disease.		

**VICTIM(S)** - [Provide victim's full name. If unable to produce victim's name, supply law enforcement agency number or DA case number and conviction date(s).]

	REASON	INITIAL
23. You shall not enter the premises, unnecessarily travel past, or loiter near where your victim frequents, resides, is employed, or attends classes.		
24. You shall not contact or attempt to contact your crime victim(s) or their immediate families. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc.		
25. You shall not threaten, stalk, abuse, harass, or commit further violent acts against the victim(s).		
26. You shall not have in your possession any of your victim's personal effects; e.g., pictures, letters, etc.		

**ASSOCIATION**

	REASON	INITIAL
27. You shall not associate with any sex offenders except when approved in writing by your parole agent.		
28. You shall not have contact with co-defendants or other arrestees of your offenses. "No contact" means no contact in any form, whether direct or indirect, personally, by telephone, by writing, electronic media, computer, or through another person, etc.		

**TRAVEL**

	REASON	INITIAL
29. You shall not travel more than _____ miles from your residence of record.		
30. You shall maintain and have in your possession a travel log which shall include (circle all that apply): date and time of departure, destination, time of arrival, mileage, route taken, with whom, and include daily starting and ending mileage.		
31. You shall not hitchhike or pick up hitchhikers.		
32. You shall not enter or loiter within 100 yards of areas of sexual or pornographic activity, (e.g., adult bookstores, massage parlors, nude or topless bars, sex shops, etc.)		
33. You shall notify your parole agent in advance of operating any motor vehicle, providing the make, model, year, color, and license number.		

**EMPLOYMENT**

	REASON	INITIAL
34. Employment shall be pre-approved by your parole agent.		
35. You shall not obtain employment that allows you to enter a residence where a stranger resides.		
36. Volunteer work shall be preapproved by your parole agent.		

SAMPLE

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

**RESIDENCE**

	REASON	INITIAL
37. You shall not reside in a residence with any person also required to register pursuant to PC Section 290, unless he or she is legally related to you by blood, marriage, or adoption. This does not include treatment programs and/or board and care facilities with the appropriate use permit.		
38. You shall not reside within one-half mile of any public or private school (kindergarten and grades 1 to 12, inclusive) specific to PC 288 or 288.5.		
39. You shall not reside within 2,000 feet of any public or private school (kindergarten and grades 1 to 12, inclusive), or parks where children regularly congregate per PC Section 3003.5(b).		
40. You shall not reside in the county of _____.		
41. You shall be in your approved residence from _____ p.m. to _____ a.m.		
42. You shall not establish a residence that has not been preapproved by your parole agent.		
43. You shall not reside within 35 miles of your victim.		

**POSSESSIONS**

	REASON	INITIAL
44. You shall not possess, or have access to any sexually oriented or sexually stimulating objects and/or devices.		
45. You shall not view, possess, or have access to any pornographic material; e.g., movies, photographs, drawings, literature, etc.		
46. You shall not view, possess, or have access to any material; e.g., periodicals, newspapers, magazines, catalogs depicting adults or children in undergarments, nude, partially nude, etc.		
47. You shall not possess or have access to sexually oriented devices, handcuffs, handcuff keys, restraint equipment, or any other items that could be used for bondage, restraint, control, or confinement.		
48. You shall not possess or have access to children's clothing, toys, games, or other similar material related to children's interests.		
49. You shall not possess any household pets or animals including animals not traditionally considered household pets; e.g., snakes, lizards, geckos, farm animals, etc.		
50. You shall not use or possess law enforcement identification, insignia, badges, uniforms, or other items identified with law enforcement.		
51. You shall not use, possess, or have access to surveillance equipment.		
52. You shall not use, possess, or have access to police radio scanners, or other telecommunications device(s) which monitor police radio transmission.		
53. You shall not wear, possess, purchase, or have access to costumes, masks, or other identity-concealing items.		
54. You shall not use or have access to a post office box, safe deposit box, storage facility, or locker.		
55. You shall not possess or have access to checks, money orders, or credit cards.		
56. You shall not possess or have access to latex, surgical, or any other type of gloves.		

**GANG:**

	REASON	INITIAL
57. You shall not contact or associate with any person you know or reasonably should know to be a member or associate of a prison gang, disruptive group, or street gang.		
58. You shall not violate any gang abatement injunction, ordinance, or court order.		
59. You shall not wear or carry on your person any clothing or apparel with gang colors, signs, symbols, or paraphernalia you know or reasonably should know to be associated with gang affiliation and/or activity.		
60. You shall not possess items such as photographs, written material, publications, jewelry, or any		

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

	REASON	INITIAL
other items depicting or describing activity you know or reasonably should know are associated with gang activity.		
61. You shall not be within 100 yards of _____, a known place of gang activity, loitering (delaying, lingering, or idling about), or congregating.		

**FAMILY VIOLENCE:**

	REASON	INITIAL
62. You shall enroll in and successfully complete a certified Batterer's Program. Enrollment shall occur within 30 days from the date of release.		
63. You shall enroll in and successfully complete a certified Parenting Program. Enrollment shall occur within 30 days from the date of release.		
64. You shall enroll in and successfully complete an Anger Management Program. Enrollment shall occur within 30 days from the date of release or 30 days from the signature of these conditions, whichever occurs last.		
65. You shall not come within 100 yards of the victim, the victim's residence, or the victim's workplace.		

**GLOBAL POSITIONING SYSTEM (GPS)**

	REASON	INITIAL
66. You shall participate in continuous electronic monitoring (e.g., Global Positioning System (GPS) technology).		
67. You may be charged criminally with grand theft, petty theft, or vandalism and be fined for the cost of the equipment's replacement in the event it is not returned, is purposely discarded, stolen, and/or damaged.		
68. You are approved for a GPS modification: You shall maintain the GPS device on your person or ambulatory device 24 hours a day, 7 days a week, except when showering or sleeping. When showering or sleeping, you must keep the device within reach of your person.		
69. You shall observe a _____ a.m. / p.m. to _____ a.m. / p.m. curfew and remain within your approved residence.		
70. You shall charge the GPS device at least two times per day (every 12 hours). Charge the device at _____ a.m. for at least 1 full hour. Charge the device at _____ p.m. for at least 1 full hour.		
71. You shall charge the GPS device for 1 hour within 10 minutes of receiving a low battery alert.		
72. You shall charge the GPS device at least two times per day (every 12 hours) for at least 1 full hour for each charging time.		
73. You shall not tamper with the device or cover the device with any material that you know or reasonably should know will interfere with the GPS signal.		
74. You shall contact your parole agent immediately if and when the device vibrates and/or makes an audible tone (beep).		
75. You shall not expose the device to extreme temperatures or place it under water; e.g., pool, hot tub, bath, etc.		

**PC SECTION 290 TRANSIENT:**

	REASON	INITIAL
76. If you are transient, you shall register as a transient and comply with all transient registration requirements pursuant to PC Section 290.011.		
77. If you are transient, you shall report to the parole office once a week on (circle all that apply): M / T / W / TH / F / S / SU.		
78. If you are transient, you shall contact your parole agent and provide him or her with the exact location that you spent the previous night and where you plan on spending the next night.		

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

	REASON	INITIAL
79. If you are transient, you shall complete a monthly report form each week and give it directly to your parole agent or to the Officer of the Day (if your agent is not in the office).		
80. If you are transient, you shall contact your parole agent by telephone between the hours of _____ a.m. and _____ p.m., on (circle all that apply): M / T / W / T H / F / S / S U .		
81. If you are transient, you shall report to the following destination _____ on (circle all that apply): M / T / W / T H / F / S / S U .		

**COMPUTER USE AND ELECTRONIC MEDIA**

	REASON	INITIAL
82. You shall not have access to or use a personal computer and peripheral devices.		
83. You shall not use or possess cameras, cell phones that include a camera, video cameras, or photography equipment of any kind.		
84. You shall not use or possess a cell phone of any kind.		
85. You shall agree to install, or allow to be installed at your own expense, equipment and/or software to monitor or limit computer use.		
86. You shall not use an electronic bulletin board system, internet relay chat channel, instant messaging, newsgroup, user group, peer to peer; e.g., Napster, Gnutella, Freenet, etc. This would include any site-base; e.g., Hotmail, Gmail, or Yahoo e-mail, etc., which allows the user to have the ability to surf the internet undetected.		
87. You shall not use the computer for any purpose which might further sexual activity; e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.		
88. You shall not use the computer for any purpose which might further sexual activity involving minor children; e.g., possession of sexually explicit material in any form; sexually related "chat" or e-mail exchange; visiting or joining "chat rooms" which contain sexually explicit conversations; visiting/viewing sexually explicit material on web sites; downloading text or video files, digital images in any format, text files or multi-media material that is sexual in nature; or visiting and/or subscribing to user groups, newsgroups, or list servers which contain sexual content.		
89. You shall not possess or view certain materials related to, or part of, the grooming cycle for your crime; e.g., images of your victim, stories or images related to your crime or similar crimes, images which depict individuals similar to your victims; e.g., children, stories written about or for individuals similar to your victim, materials focused on the culture of your victim; e.g., children's shows or web sites.		
90. You shall not use any method to hide or prevent unauthorized users from viewing specific data or files; e.g., encryption, cryptography, steganography, compression, password protected files. Log in and password information shall be provided to your parole agent upon request.		
91. You shall not alter or destroy records of computer use; e.g., delete or remove browser history data, possess software or items designed to boot into the memory in the computer, alter or "wipe" computer media, defeat forensic software, block monitoring software, restore a computer to a previous state, or reinstall operating systems, etc.		
92. You shall consent to announced or unannounced examination and/or search of electronic devices to which you have access for the limited purpose of detecting content prohibited by your conditions of parole or court order; e.g., hard disks, zip disks, floppy diskettes, CD ROMs, optical disks, thumb drives, magnetic tape, and/or any other storage media whether installed within a device or removable and separate from the actual computer device.		
93. You shall not view, possess, or have access to television sets or monitors for the purpose of viewing sexually explicit programming.		
94. You shall not view, possess, or have access to electronic media that depicts sexually explicit content.		

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

**OTHER**

	REASON	INITIAL
95. You shall not place or answer any type of classified personal advertisement seeking or soliciting a relationship with a stranger.		
96. You shall not use or access any telephone numbers designed for sexual arousal or stimulation.		
97. You shall not use any fictitious names or change your name in an attempt to conceal your registered name, conceal your true identity, or establish another identity.		
98. If you spend the night away from your residence of record, you shall notify your parole agent in advance. You shall provide all contact information, including the address and the telephone number.		
99. You shall not loiter (to delay, to linger, or to idle about) or be in the vicinity of:		
100. Unless you are a resident, you shall not enter or remain on the grounds of a day care or residential facility where elders or dependent adults are regularly present or living (PC 653c).		
101. You shall not use any public shower facility; join any health club, physical fitness training facility, or sports club.		
102. You shall wear clothing so as not to expose your genitals, breasts, or buttocks.		
103. You shall contact your parole agent within 24 hours of any type of law enforcement contact; e.g., traffic stop, identification check, suspect, witness, etc.		
104. You shall have your updated Penal Code 290 registration verification with you at all times. You must present it during any contact or interaction with any law enforcement officer.		
105. You shall observe a _____ a.m./p.m. to _____ a.m./p.m. curfew on Halloween and remain within your approved residence.		
106. You shall/shall not:		
107. You shall/shall not:		
108. Other information:		
109. Other information:		

SAMPLE

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

**REASONS FOR SPECIAL CONDITIONS OF PAROLE**

Special conditions of parole can be imposed if there is a nexus or are reasonably related to the Subject's commitment offense, criminal conduct, and/or future criminality. A special condition of parole that bars lawful activity is valid only if the prohibited conduct either:

1. Has a relationship to the crime of which the offender was convicted.
2. Is reasonably related to deter future criminality.

Conditions may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality by regulating or prohibiting non-criminal conduct.

REASON CODES	DESCRIPTION
1.	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of illegal or illicit drug use.
2.	Subject has a history, supported by an arrest, conviction, or documented admission or pattern of alcohol use and/or abuse, where continued use could result in criminal or harmful activity.
3.	Based on factors and circumstances directly related to the Subject's commitment offense(s), the imposition of this condition will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law. These factors include:
4.	Based on the nature of the commitment offense(s), a nexus exists between the behavior displayed during the course of committing his or her prior crime(s), and the behavior that is being restricted by imposing this condition. The nature of the commitment offense is described as:
5.	Based on previous offense(s) as noted in the Subject's criminal history, the restrictions imposed by this condition will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law. Previous offenses include:
6.	Based on previous offense(s) as noted in the Subject's probation or parole violation history, the restrictions imposed will assist in the goal of preventing the Subject from committing subsequent criminal offenses under Federal, State, or local law, or additional violation of his or her conditional release. Previous violations include:
7.	Subject has a documented history of psychiatric/psychological illness and/or related symptoms.
8.	Parole Outpatient Clinic referral as required per PC 3002 and/or DAPO Parole Agent policy.

PAROLEE NAME: \_\_\_\_\_ CDC NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

9.	Based on behavior displayed by offenders convicted of similar crimes, or displaying similar criminal behavior, imposition of this condition may regulate conduct that is not in itself criminal, but rather reasonably related to future criminality.
10.	Based on current federal, State, or local laws, or Regulations cited in the California Code of Regulations, Title 15, as described below, this condition is imposed to ensure compliance with the following laws or regulations:
11.	Based on your lawful requirement to register as a sex offender pursuant to PC 290, you are subject to sex offender treatment programs pursuant to PC 3008(b).
12.	Subject has a current and/or prior sex offender conviction; therefore, residence is restricted per PC 3003.5(b), current and/or prior offense(s), arrests and/or behavior as noted in the parolee's criminal history.
13.	GPS/electronic monitor use is authorized for use on Subject by PC 3010, 3010.1, 3010.5, 3010.7.
14.	Other good cause determined by parole agent as the specific condition controls those behaviors associated with subject's sexual deviancy and sex offender profile behavioral characteristics.
15.	Subject is a validated gang member.
16.	Subject has a documented history of gang involvement/activity/association.
17.	Subject has a current or prior conviction of PC 182.5 and PC 186.22.
18.	Parole Authority imposed Special Conditions of Parole
19.	Parolee volunteered to participate in the 150-day aftercare program. This special condition is to be placed on all Treatment Incentive Program participants.
20.	Based on prior history of victimizing biological or adopted children and/or evidence of risk to family members.

PAROLEE NAME (TYPE- LAST, FIRST, MI)	PAROLEE'S SIGNATURE	CDC NUMBER	DATE SIGNED

PAROLE AGENT NAME	SIGNATURE	BADGE NO.	DATE

UNIT SUPERVISOR NAME	SIGNATURE	BADGE NO.	DATE

ADOPT

<input type="radio"/> COMPLETE REPORT <input type="radio"/> SUPPLEMENTAL REPORT <input type="radio"/> CONTINUATION OF REPORT		REPORT NUMBER	ARRESTING UNIT <input type="radio"/> DAPO <input type="radio"/> OTHER	NAME OF ARRESTING AGENT/OFFICER				
DATE/TIME OF REPORT		DATE/TIME OF ARREST / INCIDENT		LOCATION OF ARREST/INCIDENT		BOOKING NUMBER		
1st CHARGE		<input type="radio"/> FELONY <input type="radio"/> MISDEMEANOR		CRIME DEFINITION				
2nd CHARGE		<input type="radio"/> FELONY <input type="radio"/> MISDEMEANOR		CRIME DEFINITION				
BOOKING LOCATION				CUSTODY/COUNTY JAIL LOCATION				
SUBJECT (IF MORE THAN ONE SUBJECT, ATTACH ADDITIONAL PAGES AND CHECK THE BOX "CONTINUATION OF REPORT")								
NAME (LAST, FIRST, MIDDLE)				ALIAS OR NICKNAME(S)				
CDC NUMBER	STATE SUPERVISED PAROLEE <input type="radio"/> YES <input type="radio"/> NO		PAROLE REGION/UNIT			POST RELEASE COMMUNITY SUPERVISION <input type="radio"/> YES <input type="radio"/> NO		
RESIDENCE ADDRESS (NO. AND STREET/APARTMENT/FLOOR/ROOM)				CITY	STATE	ZIP CODE		
MAILING ADDRESS <input type="checkbox"/> SAME			HOME PHONE NUMBER		ALTERNATE PHONE NUMBER			
SEX <input type="radio"/> MALE <input type="radio"/> FEMALE	AGE	RACE	DATE OF BIRTH	PLACE OF BIRTH	HAIR	EYES	HEIGHT	WEIGHT
DRIVERS LICENSE/ D NUMBER		STATE	STATUS OF LICENSE	OCCUPATION / NAME OF EMPLOYER		BUSINESS PHONE		
FBI NUMBER		CII NUMBER	INS NUMBER	SOC SECURITY NO		OTHER		
TATTOOS, MARKS SCARS								
VEHICLE(S) CODES SV = SUSPECT VEHICLE W = WITNESS VEHICLE V = VICTIM VEHICLE RO = REGISTERED OWNER								
NO. 1								
CODE	LICENSE NO	STATE	YEAR	MAKE	MODEL	BODY STYLE	COLOR(S)	
VIN NUMBER					NAME AND ADDRESS OF REGISTERED OWNER <input type="checkbox"/> SAME AS SUBJECT			
NAME OF LEGAL OWNER <input type="checkbox"/> SAME AS SUBJECT					VEHICLE DISPOSITION <input type="radio"/> STORED <input type="radio"/> IMPOUNDED		LOCATION OF VEHICLE	
NO. 2								
CODE	LICENSE NO.	STATE	YEAR	MAKE	MODEL	BODY STYLE	COLOR(S)	
VIN NUMBER					NAME AND ADDRESS OF REGISTERED OWNER <input type="checkbox"/> SAME AS SUBJECT			
NAME OF LEGAL OWNER <input type="checkbox"/> SAME AS SUBJECT					VEHICLE DISPOSITION <input type="radio"/> STORED <input type="radio"/> IMPOUNDED		LOCATION OF VEHICLE	
PROPERTY/EVIDENCE								
NO. 1								
ID #	DESCRIPTION			SERIAL NUMBER	MAKE/MODEL			
OWNER					LICENSE/STATE	COLOR		
STATUS	STATUS OFFICER			QUANTITY	UNITS OF MEASURE	VALUE		
GUN TYPE			CALIBER	FINISH	GRIP	GUN STOCK		
CONDITION			GUN TEST <input type="radio"/> YES <input type="radio"/> NO	TEST TYPE	SIGHT TEST <input type="radio"/> YES <input type="radio"/> NO	SIGHT TEST		
REPORTING AGENT/OFFICER (PRINT NAME)				SIGNATURE	BADGE NO.	DATE		



REPORT NO \_\_\_\_\_

SYNOPSIS (continued)

[Empty synopsis area for reporting details]

REPORTING AGENT/OFFICER (PRINT NAME)	SIGNATURE	BADGE NO	DATE
SUPERVISOR (PRINT NAME)	SIGNATURE	BADGE NO	DATE

DELETE

<input type="checkbox"/> COMPLETE REPORT <input type="checkbox"/> SUPPLEMENTAL REPORT <input type="checkbox"/> CONTINUATION OF REPORT		REPORT NUMBER	ARRESTING UNIT <input type="checkbox"/> DAPO <input type="checkbox"/> OTHER		NAME OF ARRESTING AGENT/OFFICER			
DATE/TIME OF REPORT		DATE/TIME OF ARREST / INCIDENT		LOCATION OF ARREST/INCIDENT		BOOKING NUMBER		
1 <sup>ST</sup> CHARGE		<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR		CRIME DEFINITION				
2 <sup>ND</sup> CHARGE		<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR		CRIME DEFINITION				
BOOKING LOCATION				CUSTODY/COUNTY JAIL LOCATION				
SUBJECT (IF MORE THAN ONE SUBJECT, ATTACH ADDITIONAL PAGES AND CHECK THE BOX "CONTINUATION OF REPORT")								
NAME (LAST, FIRST, MIDDLE)				ALIAS OR NICKNAME(S):				
CDC NUMBER	STATE SUPERVISED PAROLEE <input type="checkbox"/> YES <input type="checkbox"/> NO		PAROLE REGION/UNIT		POST RELEASE COMMUNITY SUPERVISION <input type="checkbox"/> YES <input type="checkbox"/> NO			
RESIDENCE ADDRESS (NO. AND STREET / APARTMENT/FLOOR/ROOM)				CITY	STATE	ZIP CODE		
MAILING ADDRESS			<input type="checkbox"/> SAME	HOME PHONE NUMBER		ALTERNATE PHONE NUMBER		
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	AGE	RACE	DATE OF BIRTH	PLACE OF BIRTH	HAIR	EYES	HEIGHT	WEIGHT
DRIVERS LICENSE/I.D. NUMBER		STA TE	STATUS OF LICENSE	OCCUPATION / NAME OF EMPLOYER		BUSINESS PHONE		
FBI NUMBER		CII NUMBER		INS NUMBER	SOC SECURITY NO.		OTHER	
TATTOOS, MARKS, SCARS								
VEHICLE(S) CODES: SV = SUSPECT VEHICLE W = WITNESS VEHICLE V = VICTIM VEHICLE RO = REGISTERED OWNER								
NO. 1								
CODE	LICENSE NO.	STATE	YEAR	MAKE	MODEL	BODY STYLE	COLOR(S)	
VIN NUMBER					NAME AND ADDRESS OF REGISTERED OWNER <input type="checkbox"/> SAME AS SUBJECT			
NAME OF LEGAL OWNER <input type="checkbox"/> SAME AS SUBJECT		VEHICLE DISPOSITION <input type="checkbox"/> STORED <input type="checkbox"/> IMPOUNDED			LOCATION OF VEHICLE			
NO. 2								
CODE	LICENSE NO.	STATE	YEAR	MAKE	MODEL	BODY STYLE	COLOR(S)	
VIN NUMBER					NAME AND ADDRESS OF REGISTERED OWNER <input type="checkbox"/> SAME AS SUBJECT			
NAME OF LEGAL OWNER <input type="checkbox"/> SAME AS SUBJECT		VEHICLE DISPOSITION <input type="checkbox"/> STORED <input type="checkbox"/> IMPOUNDED			LOCATION OF VEHICLE			
PROPERTY/EVIDENCE								
NO. 1								
ID #	DESCRIPTION		SERIAL NUMBER		MAKE/MODEL			
OWNER					LICENSE/STATE		COLOR	
STATUS	STATUS OFFICER			QUANTITY	UNITS OF MEASURE	VALUE		
GUN TYPE			CALIBER	FINISH	GRIP	GUN STOCK		
CONDITION			GUN TEST <input type="checkbox"/> YES <input type="checkbox"/> NO	TEST TYPE	SIGHT TEST <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGHT TEST		
REPORTING AGENT/OFFICER (PRINT NAME)			SIGNATURE		BADGE NO.	DATE		



EXAMPLE of AUTOMATED FORM

PVDTS Case:		Subject to 3000.1 <input type="checkbox"/> Y <input type="checkbox"/> N	
A CDC Number		Offender Name (LAST, FIRST, MI)	
Parole Unit		Region	
Age	DOB	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Race
Height		Weight	
Eyes		Hair	
Last Known Address		Residential Pattern	
Controlling Discharge Date	Code	Discharge Review Date	Date of Discovery
Hold Date		Hold Removed Date	
Arrest Date	Booking Number	Booking Location	Court Case Number
Name Booked As		Arresting Agency	
Arrest Code	ARREST CODES: A DAPO Staff Alone AB DAPO Assisted by Law Enforcement Agency		B Law Enforcement Agency Alone D Law Enforcement Agency With Information from DAPO <input type="checkbox"/> Imminent Discharge
Reasons For Retaining Parole Hold: Parolee Danger To: <input type="checkbox"/> Abscond <input type="checkbox"/> Property-Others <input type="checkbox"/> Safety-Others		Parolee/Releasee Copy Provided (Date)	Mailed or Delivered By
Commitment Offense(s):			
Offense Code	Offense Description		Controlling Offense
DEC System Checked <input type="checkbox"/> Yes <input type="checkbox"/> No			
Disability/Effective Communication Information:			
B CSRA Risk Level:	<input type="checkbox"/> Low (1) <input type="checkbox"/> Moderate (2) <input type="checkbox"/> High - Drug (3) <input type="checkbox"/> High - Property (4) <input type="checkbox"/> High - Violent (5)		
Is the Parolee a Sex Offender (as defined by PC 260)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate STAT/C 99 Risk Category: <input type="checkbox"/> Low (Score of 3 or less) <input type="checkbox"/> High (Score of 4 or more)			
Supervised Using GPS	<input type="checkbox"/> Yes <input type="checkbox"/> No	Classification	GPS used to affect arrest <input type="checkbox"/> Yes <input type="checkbox"/> No
GPS used to investigate violation <input type="checkbox"/> Yes <input type="checkbox"/> No			
C Violation(s):			
D Circumstances of Charges(s):			
D1 Parolee/Witness Statement			
D2 Court Status			

SAMPLE

CDC Number	Offender Name (LAST, FIRST, MI)	Parole Unit	Date of Discovery
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**E**

Violation Severity Score 0

**F** Instrument Recommended Response Level:

Least Intensive  
  Moderately Intensive  
  Most Intensive A  
  Most Intensive A or B  
  Most Intensive C

**G** **Recommended Responses:** Check the box in the assigned response level that will most effectively address the violation behavior. Some exceptional circumstances may warrant selection of more than one response. Options within the assigned response level are not appropriate, proceed to the optional "Override" Section I of this form.

**Response Level 1: Least Intensive**      Select Desired Sanction(s)

<input type="checkbox"/> Verbal Reprimand (1a) <input type="checkbox"/> Encourage Offender to Obtain and Maintain Full Time Employment, Refer to Employment Agencies/Programs (1b) <input type="checkbox"/> Increase Reporting Requirements (1c) <input type="checkbox"/> Written Travel Restriction (1d) <input type="checkbox"/> Imposition of Curfew (1e) <input type="checkbox"/> Imposition of any other Condition with a Nexus to the Violation or Offense (1f)	<input type="checkbox"/> Behavioral Contract (1g) <input type="checkbox"/> Referral to PACT Program (1h) <input type="checkbox"/> Referral to Parole Agent Sponsored Program (e.g. Life Skills Women's Group) (1i) <input type="checkbox"/> Referral to Community Based Substance Abuse Treatment Program (1j) <input type="checkbox"/> Referral to Community Based Support Group AA/NA (1k) <input type="checkbox"/> Referral to Certified Community Based Outpatient Counseling/Treatment Services (1l)	<input type="checkbox"/> Proposition 36 Program (1m) <input type="checkbox"/> Imposition of EID (1n) <input type="checkbox"/> Referral to other Program (Long-Term Use of Remedial Sanctions) (1o) <input type="checkbox"/> Restart Program (1p) <input type="checkbox"/> Defer to Local Adjudication (1q)
--	--	--

**Response Level 2: Moderately Intensive**      Select Desired Sanction(s)

<input type="checkbox"/> Referral to Psychological Assessment/Evaluation (2a) <input type="checkbox"/> Community Service Hours (2b) <input type="checkbox"/> Program Restrictions - Specific Limitations (2c) <input type="checkbox"/> Geographic Restrictions - Specific Limitations (2d) <input type="checkbox"/> Increase UA Testing (2e) <input type="checkbox"/> Daily Reporting with Option of UA Testing (2f) <input type="checkbox"/> Establish No-Contact Orders (2g) <input type="checkbox"/> Imposition of Curfew or Increased Curfew Enhancement (2h)	<input type="checkbox"/> Referral to Domestic Violence Program (2i) <input type="checkbox"/> Referral to Day Reporting Center (DRC) (2j) <input type="checkbox"/> Referral to Structured Residential or Outpatient Drug Treatment Program (2k) <input type="checkbox"/> Increase Number of Substance Abuse Support Group Meetings Attendance (2l) <input type="checkbox"/> Referral to Other Programs (Long-Term Use of Remedial Sanctions) (2m) <input type="checkbox"/> Mandate Participation and Completion of a Structured Residential or Outpatient Substance Abuse Treatment Program (2n) <input type="checkbox"/> Referral to Parolee Service Center (PSC) (2o)	<input type="checkbox"/> Referral to Community-Based Coalition (CBC) (2p) <input type="checkbox"/> Referral to Female Residential Service Center (FRMSC) (2q) <input type="checkbox"/> Referral to Residential Multi-Service Center (RMSC) (2r) <input type="checkbox"/> Increase Length of Treatment/Cognitive Program (2s) <input type="checkbox"/> Increase Supervision Level (2t) <input type="checkbox"/> Referral to Community-Based In-Custody Drug Treatment Program (ICDTP) (2u) <input type="checkbox"/> Re-entry Court (2v)
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CDC Number	Offender Name (LAST, FIRST, MI)	Parole Unit	Date of Discovery
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<b>Response Level 3: Most Intensive - Select Desired Sanction(s)</b> <b>Most Intensive - A</b> <input type="checkbox"/> Placement into Mental Health Services (3a) <input type="checkbox"/> Placement into Intensive Licensed/Certified Residential or Outpatient Drug Treatment Program (3b)	<b>Response Level 4: Most Intensive C</b> <input type="checkbox"/> Recommend for Revocation (4a)
--	---

<b>Most Intensive - B</b> <input type="checkbox"/> Recommend for Revocation (3e)	Recommended Revocation Days _____
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**Agent's Recommended Response Level:**  
 Least Intensive    Moderately Intensive    Most Intensive A    Most Intensive B    Most Intensive C

**Agent's Response** (Please be specific when indicating response; e.g. identify the program the offender is required to attend):

Comments:

Badge #	Name	Date
User ID	Password	Lock

SAMPLE

CDC Number	Offender Name (LAST, FIRST, MI)	Parole Unit	Date of Discovery
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**I Unit Supervisor's Determination**

Case Conference Date: \_\_\_\_\_

Between (Agent) \_\_\_\_\_ and (Supervisor) \_\_\_\_\_

Instrument Recommendation:     Least Intensive     Moderately Intensive     Most Intensive A     Most Intensive A or B     Most Intensive C

Parole Agent Recommendation:     Least Intensive     Moderately Intensive     Most Intensive A     Most Intensive B     Most Intensive C

Concur with Agent's Response:     YES     NO    Recommended Revocation Days \_\_\_\_\_

Unit Supervisor's Response Level:     Least Intensive     Moderately Intensive     Most Intensive A     Most Intensive B     Most Intensive C

Unit Supervisor's Action:     Decision     Review    Release Hold as of Date: \_\_\_\_\_

Retain Hold     Cancel Warrants    Discharge Effective Date: \_\_\_\_\_

Continue on Parole     Retain on Parole    Reinstate on Parole as of Date: \_\_\_\_\_

Time Loss:     Yes     No     Refer for Revocation    Investigate and Submit Appropriate Report by (Date): \_\_\_\_\_

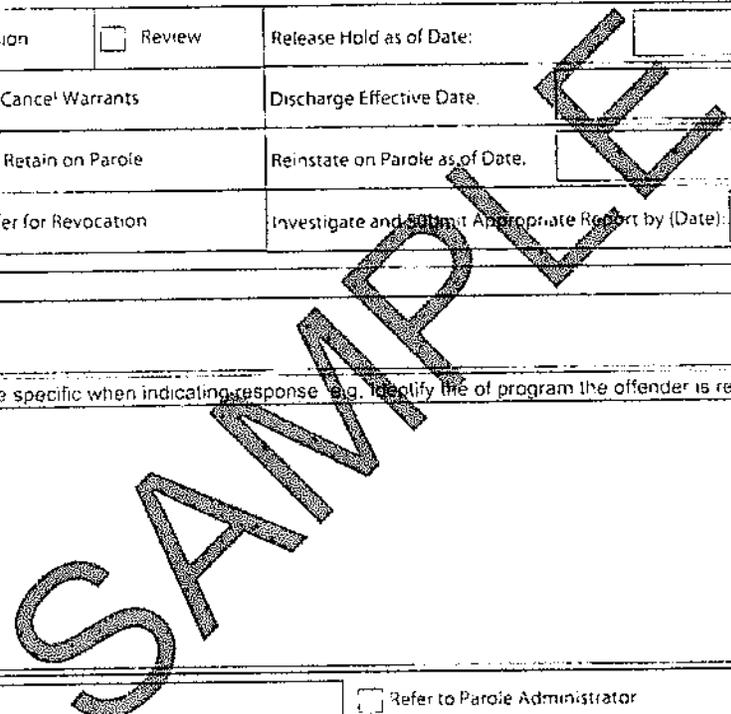
Special Conditions of Parole: \_\_\_\_\_  Add SCP  
 \_\_\_\_\_  Delete SCP

Unit Supervisor's Response (please be specific when indicating response, e.g. identify title of program the offender is required to attend)

PVDTS Case ID: Empty     Refer to Parole Administrator

Badge # \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

User ID \_\_\_\_\_ Password \_\_\_\_\_ Lock \_\_\_\_\_



CDC Number	Offender Name (LAST, FIRST, MI)	Parole Unit	Date of Discovery
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J | **Parole Administrator's Determination**

Agree     DOP     Least Intensive     Moderately Intensive     Most Intensive A     Most Intensive B     Most Intensive C

Parole Administrator's Response:

Refer for Revocation    Discharge Effective Date:

Badge #	<input type="text"/>	Name	<input type="text"/>	Date	<input type="text"/>
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User ID	<input type="text"/>	Password	<input type="text"/>	Lock	<input type="text"/>
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SAMPLE

## **INITIAL STATEMENT OF REASONS:**

The California Department of Corrections and Rehabilitation (CDCR or the Department) proposes to amend Section 3763 and adopt new Section 3767 of the California Code of Regulations (CCR), Title 15, Division 3, Subchapter 6, Article 19, Parole Violations and Reports concerning the flash incarceration of parolees.

In June 2011, the Governor approved Assembly Bill 117, Criminal Justice Realignment, which added flash incarceration under Penal Code (PC) Section 3000.08(e), effective July 1, 2013. Flash incarceration is a period of detention in a city or a county jail due to a violation of a parolee's conditions of parole. The length of the detention period can range between one and ten consecutive days. These shorter periods of detention for violations of a parolee's conditions of parole appropriately punish a parolee while preventing the disruption in a work or home establishment that typically arises from longer periods of detention. Additionally, these brief detentions can be imposed more frequently if necessary.

Currently, the revocation process is used when the Department needs to incarcerate a parolee who has violated conditions of parole. The revocation process can be lengthy and result in county jail time for up to 180 days and a suspension of parole for the same length of time. Flash incarceration will also result in jail time; however, the time spent in county jail under flash incarceration is limited to ten days. During this time the parole period is not suspended and continues to run untolled (i.e., the parolee will continue to have time reduced from his or her parole period on a day-to-day basis just as if he or she were in the community).

The use of flash incarceration is not new to California. In 2011, under Assembly Bill 109, county probation departments were given authority to flash incarcerate under PC 3454. Currently, county probation departments throughout the state utilize flash incarceration to address violations of offenders on post-release community supervision. The use of flash incarceration will allow the Department to intervene with a swift and certain short-term incarceration when parolees commit minor or technical violations of their parole conditions or the law. Flash incarceration will serve as an intermediate/remedial sanction and as a means of meeting the corrective needs of supervision without a lengthy detention or revoking parole.

The Department's intermediate/remedial sanctions include, but are not limited to, increased levels of supervision, referrals to community based program and residential treatment programs, curfews, and electronic in-home detention monitoring. These proposed regulations add flash incarceration to the list of intermediate/remedial sanctions available to the Department as a tool to address parole violations. Although flash incarceration can be used to address all types of parole violations, the Department will use flash incarceration, along with other intermediate/remedial sanctions, to address technical violations of parole outside of the revocation process. Some examples of technical violations include drug use, failure to attend/participate in required programs, or on-going non-compliant behavior. The objective of imposing intermediate/remedial sanctions is to discourage and deter the parolee from violating any of their conditions of parole and ultimately reduce recidivism. Flash incarceration can be a valuable tool as an intermediate/remedial sanction when staff has determined it necessary to disrupt negative parolee behavior. When deciding to utilize any and all intermediate/remedial sanctions, including flash incarceration, staff will always consider public safety.

These regulations are necessary to interpret and implement PC Section 3000.08(e) concerning flash incarceration. The regulations clarify that the parolee shall be provided written notification of the flash incarceration and the length of the flash incarceration. Additionally, the regulations establish that the parole agent must receive approval from the unit supervisor in order to impose a period of flash incarceration. Flash incarceration is being limited to three flash incarceration periods per parolee without filing a petition for revocation with the court. Once a petition for revocation is filed with the court by the Department, the option to use the three flash incarcerations will once again be available to the Department. The Department has put this limitation in place as a means to control the use of flash incarceration as a remedial sanction by the Department.

### **Consideration of Alternatives:**

The Department must determine that no reasonable alternative considered, or that has otherwise been identified and brought to the attention of the Department, would be more effective in carrying out the purpose for which this action is proposed, would be as effective and less burdensome to affected private persons than the action proposed, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Currently, no reasonable alternatives have been brought to the attention of the Department that would alter the Department's initial determination.

### **ECONOMIC IMPACT ASSESSMENT:**

In accordance with Government Code Section 11346.3(b), the CDCR has made the following assessments regarding the proposed regulations:

#### **Significant Adverse Economic Impact on Business**

The Department has made an initial determination that the proposed regulations will not have a significant statewide adverse economic impact on business, including the ability of California businesses to compete with businesses in other states, because the proposed regulations only affect parolees under CDCR supervision and place no obligations or requirements on any business.

#### **Creation of New or the Elimination of Existing Jobs within the State of California**

The Department has determined that the proposed regulations will not have an impact on the creation of new, or the elimination of existing, jobs within California. The proposed regulations place no requirements or restrictions on businesses inside or outside of California, as they affect only California offenders released on parole.

#### **Creation of New or the Elimination of Existing Businesses within the State of California**

The Department has determined that the proposed regulations will not have an impact on the creation, expansion or elimination of new or existing business within California. The proposed regulations place no requirements or restrictions on businesses inside or outside of California, as they affect only California offenders released on parole.

#### **Expansion of Businesses Currently Doing Business in the State of California**

The Department has determined that the proposed regulations will not have an impact on the expansion of businesses currently doing business in California. The proposed regulations place no requirements or restrictions on businesses inside or outside of California, as they affect only California offenders released on parole.

#### **Benefits of the Regulations**

These regulations may benefit the welfare of California residents by helping to reducing recidivism and thereby improve public safety. The regulations establish criteria for the flash incarceration of offenders who violate conditions of parole. The proposed regulations will not affect worker safety or the State's environment.

#### **Materials Relied Upon:**

The Department, in proposing amendments to these regulations, has not identified nor has it relied upon any technical, theoretical, or empirical study, report, or similar document.

**Specific Purpose and Rationale for each Section, per Government Code 11346.2(b)(1):**

**Amended title of Article 19 is adopted.**

**Article 19 Parole Violations, Flash Incarcerations, and Reports.**

**3763. Petition for Revocation**

**Subsection 3763(a)(6) is amended** to add revision dates for two forms referenced in this subsection. The CDCR Form 1676 is unchanged but the correct revision date is being adopted. The CDCR Form 1502-B is amended to add more space for writing violations. Additionally, CDCR Form 1515-Addendum has been automated into the Department's Strategic Offender Management System. Several Department forms have been automated in recent years. The Department's practice when automating a form as part of a rulemaking action has been to include a printout of the form with the rulemaking documents noticed to the public. The contents of the form itself are not being amended in this rulemaking action.

**Subsection 3763(b) is amended to** update the form revision date for CDCR Form 2278, Arrest Report. This form is revised to include a third page to provide additional space for a synopsis of the arrest. The signature block, badge number, and date for the reporting agent/officer and supervisor were moved from page two to page three of the report. Additionally, non-substantive formatting changes were made.

**3767. Flash Incarcerations.**

**New subsection 3767(a) is adopted** to establish that CDCR has the authority to impose a period of flash incarceration upon parolees who violate conditions of parole, and establishes that the period of flash incarceration imposed shall not exceed 10 consecutive days, in accordance with Penal Code Section 3000.08(e). New language establishes that during a period of flash incarceration the parole period continues to run. Because PC 3000.08(e) does not revoke the parole period this language is necessary to make clear that the parole period is not tolled (stopped) during a period of flash incarceration.

**New subsection 3767(b) is adopted** to establish that the Department must investigate a parole violation and use the automated CDCR Form 1500, Parole Violation Decision Making Instrument, to recommend flash incarceration as a remedial sanction and at least one additional remedial sanction to address parolee criminogenic needs. Several Department forms have been automated in recent years. The Department's practice when including an automated form as part of a rulemaking action has been to include a printout of the form with the rulemaking documents noticed to the public. The contents of the form itself are not being amended in this rulemaking action. A criminogenic need is an attribute of an offender that is directly linked to criminal behavior. DAPO requires an additional remedial sanction to correct the identified behavior over the long term. The new language is necessary for consistent application by the Department when using flash incarceration as a remedial sanction.

**New subsection 3767(c) is adopted** to establish that an approval from a unit supervisor or higher is required before a parolee can be placed into custody to serve a period of flash incarceration. This provision is necessary as an additional level of review to help protect parolees from unwarranted incarceration.

**New subsection 3767(c)(1) is adopted** to establish that the Department shall, pursuant to Section 3754, provide, within three business days, written notice to the parolee noticing them of the violation(s) and the length of the flash incarceration. This language is necessary to ensure that the parolee receives written notice of the flash incarceration and the length of the time the parolee will be incarcerated on the flash incarceration, as required by existing regulatory provisions.

**New subsection 3767(c)(2) is adopted** to establish that the day of booking into custody (confinement in a city or county jail facility) shall count as day one when it is determined that flash incarceration is the appropriate sanction to address the parolee's conduct. Because PC 3000.08 does not specify how days are to be calculated, the new language establishes how flash incarceration days will be calculated.

**New subsection 3767(d) is adopted** to establish that the Department shall not impose more than three flash incarceration periods upon a parolee without filing a petition for parole revocation. After the third use, flash incarceration cannot be used by the Department again until a referral to the court for revocation is made. Upon every petition filed with the court for revocation, the flash incarceration period shall reset to make the three flash incarcerations options available for use by the Department as a remedial sanction. This provision is necessary to avoid overuse of flash incarceration as a sanction. DAPO has determined that three violations that have led to the use of flash incarceration shows a pattern of non-compliance, and a higher level of intervention is needed.

**New subsection 3767(e) is adopted** to establish that the parolee is responsible for reporting to the parole office upon release from custody. This subsection also establishes that the parole agent shall implement remedial sanctions upon the parolee's release from custody. The new language is necessary to enforce the Department's efforts to protect the community and maintain public safety by requiring the parolee to report to the parole office upon release from custody.