

ADOPT

INMATE ~~SEGREGATION~~ RESTRICTED HOUSING PROFILE

CDC 114-A1 (10/98-11/23)

Update information legibly and prepare a new CDC Form 114-A1 at least every 90 days or as required to maintain current information.

DATE INITIATED	CDC NUMBER	INMATE'S NAME	ETHNICITY	CELL
DATE OF BIRTH	COUNTY OF LAST LEGAL RESIDENCE	CONTROLLING COMMITMENT OFFENSE	PRIOR HOUSING	
REASON FOR SEGREGATION RESTRICTED HOUSING		DATE OF ASRHU PLACEMENT	CS	PRISON RELEASE DATE
				RHU MERD

SPECIAL INFORMATION

COMMENT WHEN ADDITIONAL INFORMATION WOULD HELP CLARIFY AN ISSUE

MED/PSYCH ISSUE: EOP CCCMS DPP: HEARING SIGHT MOBILITY

YES	NO		YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	STAFF THREATS/BATTERY:	<input type="checkbox"/>	<input type="checkbox"/>	SAFETY CONCERNS (WHEN/WHERE?):
<input type="checkbox"/>	<input type="checkbox"/>	INMATE THREATS/BATTERY:	<input type="checkbox"/>	<input type="checkbox"/>	PRIOR SUICIDE ATTEMPTS:
<input type="checkbox"/>	<input type="checkbox"/>	SEX RELATED OFFENSES/DISCIPLINARIES:	<input type="checkbox"/>	<input type="checkbox"/>	CELLING LIMITATION/RESTRICTIONS:
<input type="checkbox"/>	<input type="checkbox"/>	IN PRISON WEAPON OFFENSES:	<input type="checkbox"/>	<input type="checkbox"/>	PRIOR CELL FIGHTS:
<input type="checkbox"/>	<input type="checkbox"/>	GANG STATUS:	<input type="checkbox"/>	<input type="checkbox"/>	DOUBLE CELL/AUTHORIZED BY:
<input type="checkbox"/>	<input type="checkbox"/>	NICKNAME OR MONIKER:	<input type="checkbox"/>	<input type="checkbox"/>	PRIOR SINGLE CELL STATUS (WHEN/WHERE/REASON):
<input type="checkbox"/>	<input type="checkbox"/>	ESCAPE RISK	<input type="checkbox"/>	<input type="checkbox"/>	

COMMENTS/OBSERVATIONS

ENEMIES/RIVAL GROUPS (LIST ALL ENEMIES HOUSED IN THIS INSTITUTION)

DATE ADDED	NAME AND CDC NUMBER	HOUSING/LOCATION	GANG STATUS/COMMENTS

ADDITIONAL ENEMIES NOTED ON ATTACHED INMATE ~~SEGREGATION~~ RESTRICTED HOUSING PROFILE

YARD ASSIGNMENT:	<input type="checkbox"/> WALK ALONE	<input type="checkbox"/> CONTROLLED/COMPATIBLE	<input type="checkbox"/> REINTEGRATED/MIXED	
ICC DATE:				
YARD ASSIGNMENT:	<input type="checkbox"/> WALK ALONE	<input type="checkbox"/> CONTROLLED/COMPATIBLE	<input type="checkbox"/> REINTEGRATED/MIXED	Reason for Change
ICC DATE:				
YARD ASSIGNMENT:	<input type="checkbox"/> WALK ALONE	<input type="checkbox"/> CONTROLLED/COMPATIBLE	<input type="checkbox"/> REINTEGRATED/MIXED	Reason for Change
ICC DATE:				

YARD ASSIGNMENT RESTRICTIONS/COMMENTS:

PRINTED NAME, TITLE AND SIGNATURE OF PERSON INITIATING FORM	DATE
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HIGHLIGHT "CONFIDENTIAL" ENEMIES AND REDACT PRIOR TO SENDING TO RECORDS OFFICE FOR SLOUGH FILING