



## Department of Public Safety and Correctional Services

### INTERNATIONAL PRISONER TRANSFER REFERRAL PACKET CHECKLIST

TO: \_\_\_\_\_, RPOC Compact Administrator

FROM: \_\_\_\_\_, Facility Compact Coordinator

INSTITUTION: \_\_\_\_\_, Date: \_\_\_\_\_

Inmate: \_\_\_\_\_, DOC#: \_\_\_\_\_

has been processed by case management for international prisoner transfer to the country of \_\_\_\_\_.

In accordance with the provisions of this manual, a referral packet, including the information listed below, is attached:

\_\_\_\_\_ The original international prisoner transfer application, questionnaire and case summary (Appendices 6, and 7 to CMM- 19);

\_\_\_\_\_ Birth certificate or copy of passport (if available);

\_\_\_\_\_ Immigration status (if known) and the alien number (if available);

\_\_\_\_\_ A copy of the inmate's base file progress sheets, if available, case plan and case notes;

\_\_\_\_\_ A copy of the inmate's complete adjustment history;

\_\_\_\_\_ A certified judgment and or court order signed by the sentencing judge that lists the crimes, laws and statutes for which the inmate was convicted;

\_\_\_\_\_ The original letter from the sentencing judge and prosecuting attorney of State's intent for IPT

\_\_\_\_\_ An updated identification photograph of the inmate;

\_\_\_\_\_ A copy of the inmate's fingerprints;

\_\_\_\_\_ A copy of the inmate's FBI report;

\_\_\_\_\_ Copies of the inmate's court commitment(s), detainers and any other judicial and/or administrative rulings relative to the sentence of the inmate for which confinement is to be made or continued;

- \_\_\_\_\_ A copy of the state's version, statement of charges or PSI, if available;
  
- \_\_\_\_\_ A copy of the sentence calculation, must include jail credits received, and an explanation of all credits (GCC, IC, SPC and EC include the number earned)  
Note: This should be a response drafted by Commitment staff.
  
- \_\_\_\_\_ A psychological evaluation;
  
- \_\_\_\_\_ A medical evaluation that includes chronic conditions, last PPD, hepatitis evaluation and all medications prescribed to inmate.
  
- \_\_\_\_\_ Victim impact statements, if available, any correspondence from victim and copy of notification to Victim Services