

Inmate Name:

Inmate Number:

Facility:

Screener:

Date:

JRA ADMINISTRATIVE RELEASE AUDIT WORKSHEET

| | Y | N |
|---|--------------------------|--------------------------|
| 1. Is the inmate sentenced to 6 months or more? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the inmate currently serving a sentence for a qualifying offense? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the inmate serving a mandatory minimum sentence, has the inmate served the mandatory portion of the sentence? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does the inmate have prior convictions for a crime of violence? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the inmate required to register as a sex offender upon release? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does the inmate have two or more convictions for certain drug offenses? | <input type="checkbox"/> | <input type="checkbox"/> |