Work Release Exception
Packet Checklist

Facility: _____

Inmate Name: _____ ODOC #: _____

CRC (current to packet submission date, front and back)   _____

Prior CRC (front only)   _____

Rap Sheet(s) (to include NCIC and OSBI)   _____

JOLTS (Juvenile Record)   _____

Inmate Profile (current to packet submission date)   _____

Custody Assessment (current to packet submission date)   _____

Chronological Case Notes (during the time at your facility)   _____

Please attach this form and all of the above information to each exception request.

Signature: _____   Date: _____

Administrator: _____   Date: _____

(R 03/22)