 **CORRECTIONAL INDUSTRIES**

**WORK PROGRAM RECOMMENDATION REFERRAL**

Worker DOC number Date

Location Unit/cell Priority

|  |
| --- |
| **QUALIFICATIONS** |

Maximum expiration date Earned release date Years remaining Multidisciplinary team date

Indeterminate Sentence Review Board, Life Without Parole, or 20+ years to serve? [ ]  Yes [ ]  No

Currently possess or pursuing a high school diploma or general equivalency degree? [ ]  Yes [ ]  No

Expressed voluntary interest in consideration for Correctional Industries positions? [ ]  Yes [ ]  No

Vocational state certificate? ………………………………………………………………… [ ]  Yes [ ]  No

Guilty finding for Category A or drug-related violation in last 12 months? …………….. [ ]  Yes [ ]  No

 If yes, violation number(s):       date(s):

Guilty finding for any other serious violation in last 6 months? …………………………. [ ]  Yes [ ]  No

 If yes, violation number(s):       date(s):

Pending disposition(s) for a serious violation? ……………………………………………. [ ]  Yes [ ]  No

 If yes, violation number(s):       date(s):

Minimum of 2 years since any escape? …………………………………………………… [ ]  Yes [ ]  No

Medical/mental health limitations/concerns? ……………………………………………… [ ]  Yes [ ]  No

Comments (Do not include protected health information):

|  |
| --- |
| **APPROVAL/DENIAL** |

In addition to the above, a worker may be denied Industrial Area work clearance due to extensive violation history, severity of violations, Intensive Management Unit placements, violent criminal history summary, or other placement reasons.

[ ]  Approved [ ]  Denied Explain:

      

Case Manager Signature Date

[ ]  Approved [ ]  Denied Explain:

      

Correctional Program Manager/designee Signature Date

**The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.**

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