



Additional Term Hearing Decision and Minutes

Incarcerated Adult's Name (last name, first name):	Inst Number:	Current Institution:	Hearing Date:
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Docket Number	County	TOT AT Time:	Offense(s):
SB201 MIN	SB201 MAX	SB201 MAND MIN	SB201 MAND MAX

Date Rule Violation occurred	Tier 1 Rule Infractions	Tier 2 Rule Infractions	Tier 3 Rule Infractions	Non-Tier Rule Infractions

Offenses for which the incarcerated adult was criminally prosecuted cannot be considered.

IF ONE OR MORE OF THE FOLLOWING NUMBERED REASONS APPLY, THE PRESUMPTION OF RELEASE AT THE MINIMUM IS REBUTTED:



1. a, b & c apply: Rule: _____



a) During incarceration, the incarcerated adult committed institutional rule infractions that involved one of the following:

- Yes No Compromising the security of a state correctional institution
- Yes No Compromising the safety of the staff of a state correctional institution or its incarcerated adults
- Yes No Physical harm or the threat of physical harm to the staff of a state correctional institution or its incarcerated adults
- Yes No The incarcerated adult committed a violation of law that was not prosecuted

(If the answer to any of the above questions is yes, then answer question b below.)

b) Yes No The infractions or violations demonstrate that the incarcerated adult has not been rehabilitated.
(if YES answer question c below)

c) Yes No The incarcerated adult's behavior while incarcerated, including, but not limited to the infractions and violations specified above, demonstrate that the incarcerated adult continues to pose a threat to society.

2. The incarcerated adult has been placed in extended restrictive housing (30 days or more) at any time within past year.

- Yes
- No

3. The incarcerated adult's current security level is 3 or higher;

- Yes
- No

OTHER INFORMATION (Check Any that Apply)

- Repeated Rule Infractions since original Rule Infraction.
- Security level increased as a result in behavior.
- Rule Infraction is same or similar to current incarcerating offense.

INCARCERATED ADULT'S MITIGATION:

- Yes No

If Yes, please explain:

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MITIGATION

Check all mitigating factors that apply.

- | | |
|--|--|
| <input type="checkbox"/> Worked Institution Job | <input type="checkbox"/> Participated in Community Service |
| <input type="checkbox"/> Completed programming since RIB behavior. | <input type="checkbox"/> 1 year since last Rule Infraction. |
| <input type="checkbox"/> No Rule Infractions since original Rule Infraction. | <input type="checkbox"/> Case Plan Followed (for moderate or above). |

RESULT OF HEARING

Hearing Held in Abstentia (list reason)

Hearing not conducted: _____

Additional Term to be imposed: _____ Presumption of release not rebutted

Hearing Officer Comments:

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Hearing Officer Signature:	Date:
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Chief Hearing Officer approval (if the Additional Term imposed exceeds 365 days).

Chief Hearing Officer Signature:	Date:
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NOTE: Notify Incarcerated Adult & Bureau of Sentence Computation of Additional Term Hearing Results.



VALIDATED ON BEHALF OF THE OHIO PAROLE BOARD

CHAIR

DATE