



# JAIL INFORMATION MODEL

## SECURITY THREAT GROUP UNIT

Division: <b>Corrections</b>	Date:	Effective Date: <b>Mod:</b>
<b>JAIL INFORMATION REFERRAL FORM</b>		<b>ROUTING #:</b>

INTERNAL SECURITY <input type="checkbox"/>	INTERNAL CRIMINAL <input type="checkbox"/>	EXTERNAL CRIMINAL <input type="checkbox"/>
<input type="checkbox"/> Inmate Safety Issue	<input type="checkbox"/> Assaults	Jurisdiction:
<input type="checkbox"/> Staff Safety Issue	<input type="checkbox"/> Narcotics	<input type="checkbox"/> Burglary
<input type="checkbox"/> Contraband	<input type="checkbox"/> Sexual assault	<input type="checkbox"/> Auto theft
<input type="checkbox"/> Weapons	<input type="checkbox"/> Witness intimidation	<input type="checkbox"/> Narcotics
<input type="checkbox"/> Escape Information	<input type="checkbox"/>	<input type="checkbox"/> Gang related
<input type="checkbox"/> Riot	<input type="checkbox"/>	<input type="checkbox"/> Robbery
<input type="checkbox"/> Gang Activity	<input type="checkbox"/>	<input type="checkbox"/> Homeland Security/Terrorism
<input type="checkbox"/> Security Concern	<input type="checkbox"/>	<input type="checkbox"/> Homicide
<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/> Assault
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Weapons
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other

### SOURCE OF INFORMATION

Inmate Name:		Booking #		Housing Unit	
Classification:		Gang association:		Cell #	

Details:


IR #					
Submitted by:	Print Name:	Signature:			

### VALIDATED

<input type="checkbox"/> STGU officer	<input type="checkbox"/> STGU Lieutenant	<input type="checkbox"/> STGU Captain	
INTERNAL NORMAL <input type="checkbox"/>	INTERNAL PRIORITY <input type="checkbox"/>	EXTERNAL NORMAL <input type="checkbox"/>	EXTERNAL PRIORITY <input type="checkbox"/>

### NOTIFICATIONS

Notification by:	Date:	Time:		
Notification made to:	Department:			
Method of notification:	FAX <input type="checkbox"/>	E-mail <input type="checkbox"/>	Phone <input type="checkbox"/>	Other <input type="checkbox"/>

### FOLLOWUP and FEEDBACK NOTIFICATION
