

**96-Hour Segregation Hearing**

Date: \_\_\_\_\_

I. Offender: \_\_\_\_\_ GDC Number: \_\_\_\_\_

Facility/Center: \_\_\_\_\_

II. On: \_\_\_\_\_ at: \_\_\_\_\_  
(date) (time)

In accordance with GDC Rule 125-3-1-.03 and SOP 209.06, you were placed in Administrative Segregation (voluntarily/involuntarily) for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. Offender's rebuttal: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. Classification Committee: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A. Above Offender has been informed of reasons why placed in Administrative Segregation.

B. Recommendation:  Remain in Administrative Segregation.  
 Return to appropriate housing unit.

\_\_\_\_\_  
Member Member Chairman

Copy: Offender