Facility

SEGREGATION: TIER I PROGRAM HEARING

_________________________________
Date

I. Offender: ___________________________ GDC ID: ______________________

II. On: ___________________________ at: ___________________________

   (Date) (Time)

In accordance with GDC Rule 125-3-1-.03, on this date: ______, you were placed in Tier I 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 Disciplinary Segregation.

   __

B. Recommendation:  [] Remain in Tier I Segregation.

   [] Return to population.

   [] Assign to Tier II Program

   ___________________________  ___________________________  ___________________________

   Member  Member  Chairman

V. Warden's Remarks: Approval []  Disapproval [] ___________________________

   Warden / Superintendent Signature / Date

Comments: _____________________________________________________________

_______________________________________________________________________
_______________________________________________________________________

Copies:  Offender File

RETENTION SCHEDULE: Upon completion of this form, it will be placed in the offender/probationer's case history file.