

Administrative Segregation: Tier II Program  
Assignment Memo

FACILITY: \_\_\_\_\_

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

RE: Administrative Segregation: Tier II Assignment

Offender: \_\_\_\_\_ GDC #: \_\_\_\_\_

Present Assignment: \_\_\_\_\_

The above named offender is being assigned to the Administrative Segregation: Tier II Program for the reasons indicated:

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

Date: \_\_\_\_\_ Warden's/Designee Signature: \_\_\_\_\_

\*\*\*\*\*

I acknowledge the receipt of this Assignment Memo for placement in A/S: Tier II Program.

Date: \_\_\_\_\_ Offender's Signature: \_\_\_\_\_

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I acknowledge that the offender received the A/S: Tier II Program Assignment Memo on this Date.

I acknowledge that the offender received the A/S: Tier II Program Appeal form on this Date.

Date: \_\_\_\_\_ Staff Signature: \_\_\_\_\_

Copies: Offender  
Offender File

RETENTION SCHEDULE: Upon completion of this form, it shall be placed in the offender case history file.