Rejected: Notification of Referral to the Criminal Investigations Division (OPS)

TO: Offender Name, GDC#  
________________Facility/Center
FROM: Warden/Superintendent  
________________Facility/Center
RE: GRIEVANCE #

This memorandum is in response to your grievance that was filed on ________. Upon review, it has been determined that you failed to follow the proper procedure for filing the formal grievance; therefore, this grievance is being rejected in accordance with policy. However, due to the nature of the allegation, an investigation is warranted.

Therefore, a copy of your grievance has been forwarded to the Georgia Department of Corrections Criminal Investigations Division on ________ for review. The Criminal Investigation Division will determine what action is appropriate. Although this letter serves as the formal response to your grievance, the investigative process is on-going.

You will be notified upon the completion of the investigation by the Criminal Investigations Division.

__________________________  ____________________
Warden/Superintendent Date

__________________________  ____________________
Offender GDCID# Date

Retention Schedule: Upon Completion, this form shall be maintained with the grievance packet for four (4) years and then destroyed.