



# Request for Inclusion or Revision to an Administrative Directive

Connecticut Department of Correction

CN 1301  
REV 11/15/10

Administrative Directive Number: **10.15** | Title: **Inmate Personal Identification Procurement and Storage**

I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):

**Section 7 – Storage of Personal Identification (Subsection A)** – Recommend changing language to reflect the change of storage location from “inmate’s central property file” to “inmate’s identification file located in the facility classification/records unit”. Recommend removal of second paragraph of subsection as obsolete.

**Section 7 – Storage of Personal Identification (Subsection B)** – Recommend changing language to reflect the change of storage location from “inmate’s central property file” to “inmate’s identification file located in the facility classification/records unit”.

**Section 7 – Storage of Personal Identification (Subsection D)** - Recommend changing language to reflect the change of storage location from “inmate’s central property file” to “inmate’s identification file located in the facility classification/records unit”. Recommend changing references to “Property Officer” to “Re-Entry Counselor” in entire subsection.

### Forms & Attachments

**CN 101501 – Inmate Official Identification Form** – Recommend changes to form to align types of primary and secondary identification with current Department of Motor Vehicles (DMV) requirements. See attached Draft for suggested revisions.

See attached documents

### ORIGINATOR

Name: [REDACTED] | Title: [REDACTED] | Date: **10/15/14**

Signature: [REDACTED] | Facility/Unit: [REDACTED]

### UNIT/DISTRICT/DIVISION RECOMMENDATIONS

Approved    Denied

    Unit Administrator’s signature: \_\_\_\_\_ Date: \_\_\_\_\_

    District Administrator’s signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(only needed if originating from facility)

    Division Administrator’s signature: *[Signature]* Date: **10/15/14**

### COMMISSIONER’S DECISION

This request is:     **APPROVED**     **DENIED**    Effective date of request: 10/20/14

The language/provisions of this inclusion/revision shall be effective as of: \_\_\_\_\_ and subsequently added to the Administrative Directive at the next update.

This inclusion/revision shall be added to the Administrative Directive prior to: \_\_\_\_\_

This inclusion/revision shall be added immediately to the Administrative Directive.

Commissioner’s signature: *[Signature]* | Date: **10/20/14**