



Request for Inclusion or Revision to an Administrative Directive

Connecticut Department of Correction

CN 1301
REV 02/06/15

Administrative Directive Number: 10.15	Title: Inmate Personal Identification Procurement and Storage
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I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):

Section 6: Social Security Card Placement. Revise wording in paragraph 1 to read "The facility shall assist the inmate in obtaining a replacement social security card through the appropriate process within **180 days** of the inmate's discharge or pending release to community supervision."

Revise wording in paragraph 2 to read "These procedures shall apply to inmates who **are US citizens**, who have a valid social security number, **have not used multiple social security numbers**, and are in need of a replacement social security card. Inmates who **are non US citizens, request a name change**, or require a social security number must physically present themselves, upon release, to a Social Security Administration Office for appropriate action."

Reason: The above language in bold type reflects the conditions set forth in the new Memorandum of Understanding between SSA and CT DOC. MOU is attached.

See attached documents

ORIGINATOR

Name: [Redacted]	Title: [Redacted]	Date: 5/19/15
Signature: [Redacted]		Facility/Unit: [Redacted]

UNIT/DISTRICT/DIVISION RECOMMENDATIONS

Approved	Denied	Signature	Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Unit Administrator's signature: <i>P. Kupiec</i>	Date: 6-15-15
<input type="checkbox"/>	<input type="checkbox"/>	District Administrator's signature: <small>(only needed if originating from facility)</small>	Date:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Division Administrator's signature: <i>R. Arnold</i>	Date: 7/6/15

COMMISSIONER'S DECISION

This request is: **APPROVED** **DENIED** Effective date of request: As Practicable

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: <i>[Signature]</i>	Date: 7/9/15
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