LOUISIANA BOARD OF PARDONS, Committee on Parole DECISION FORM

Name	DOC Number	Institution	
The Louisiana Committee on Parole. after du	e consideration of all of the facts in your case, has made the	e decision that:	
☐ You are GRANTED parole	consideration of all of the facts in your case, has made the	, decision that.	
	th recommendation for Transitional Work Program (TWP)	¹ until parole date	
 Upon completion of High School 			
	ed substance abuse education/treatment program		
□ Upon completion of 100 hours pr	release programming		
□ Other:			
☐ Your release is <u>conditioned</u> upon: ☐ Approval of residence ☐ No disc	plinary infractions □ Approval of out-of-state plan □ App	proval of Employment	
☐ A Low Static99 Score (applicable to s		noval of Employment	
	You will be recommended for placement in a TWP. Your case	will be re-evaluated after a perio	
of six months TWP participation. If pa	ole is granted at that time, special conditions as indicated below s	shall apply.	
	or the following reason:	Se	
comments below.	UD 1		
 Your parole hearing has been <u>CONTINU</u> □ Verification of disposition of pen 			
☐ The need for additional other info			
You are DENIED parole for the following			
□ Victim Opposition	☐ Institutional Disciplinary Reports		
□ Prior Criminal History	☐ History of Drug/Alcohol Abuse		
☐ Probation/Parole Unsatisfactory/			
□ Psychological and/or Psychiatric			
☐ Violation of TWP Agreement	 Law Enforcement and/or Judicial Obje 	ection	
☐ Failed to complete Rehabilitative	Programming Other:		
You must comply with the following SPECI			
A. Pay restitution, victim reparation		E. HSE, Vo-Tech, or other education plan	
B. Pay fines and/or costs of court	*	F. Curfew 10pm-6am	
C. No contact with victim(s), or victim's		G. Comply with conditions of R.S. 15:574.4.2	
D. No contact with codefendant(s)	H. Other Conditions/Additional Infor	mation:	
Date	Chairman, P Committee o		
BY MY SIGNATURE BELOW	ACKNOWLEDGE THAT I RECEIVED A COPY OF THIS PAROL	LE DECISION.	
	WITNESSED BY:		
OFFENDER SIGNATURE (DATE)	WITNESS PRINTED NAME SIGNAT	TURE (DATE)	
nas served a minimum of 15 years in the custody of DO aggravated arson (14:51)	eligible for TWP participation <u>only during the last 6 months</u> of incarce, in which case the offender is eligible for TWP <u>during the last 12 months</u> armed robbery (14:64) o attempted armed robbery	hs of incarceration: (14:27 and 64)	
An offender convicted of a sex offense as defined in 15:	of forcible rape (14:42.1) 41 is not suitable for participation in a TWP. e eligible during last 12 months of term (15 yr minimum DOC custody no	,	