

**IDAHO DEPARTMENT OF CORRECTION**  
**Sex Offender 30-Day Review Form**

REVIEW DATE  DISTRICT  PPO NAME  REVIEWER

OFFENDER NAME  IDOC #  ASSIGNED DATE  SIGN UP DATE

**Section I 30-DAY SEX OFFENDER MANAGEMENT STANDARDS REVIEW**

	Achieves	Does Not Achieve	N/A or Waived	Comments/Feedback
Documented review of file/conducted assessments/assigned appropriate supv level or override	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Reviewed and signed court order/parole agreement/SO agreement of supervision with offender	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Confirmed sex offender registration/DNA submission and/or obtained DNA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Caseplan entered in OMP and based on LSI domains (if applicable) and/or SO risk/need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Collateral contacts conducted first 30 days: treatment providers, court, family members, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Residence verification <span style="float:right">RESIDENCE VERIF. DATE <input type="text"/></span>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Employment verification <span style="float:right">EMPLOYMENT VERIF. DATE <input type="text"/></span>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

**Section II CASE PLANNING**

	DATE	SCORE	Achieves	Does Not Achieve	N/A or Waived	Comments/Feedback
Stable 2007 current and properly scored	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Static 99R current and properly scored	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
LSI-R current and properly scored	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Contacts/ information (residence, employ, phone, vehicle, etc.)/staffings/polys/testing documented in appropriate module			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Supervision Level

30 Day Review Percentage

Additional  
Comments/  
Feedback

A large, empty gray rectangular area intended for providing additional comments or feedback. It occupies the central portion of the page, bounded by a thin black line.