


PRISON

PRISION FORM 4

SHORT SENTENCE

PRISONERS RECORD FORM

NAME	<input type="text" value="gdgdf gdfg dfgdfg"/>		PRISONER NUMBER	<input type="text" value="CEND0000130/18"/>
S/O	<input type="text" value="fgdfg"/>		PROPERTY BOOK NUMBER	<input type="text" value="CEND0000130/18"/>
DATE OF ADMISSION	<input type="text" value="01-09-2018"/>			
COURT	<input type="text" value="Chief Magistrate Court"/>			
OFFENCE	<input type="text" value="Abduction"/>			
L.P.D	<input type="text"/>			
DATE SENTENCE EXPIRES	<input type="text" value="{date_of_sentence}"/>			
NEXT OF KIN NAME	<input type="text"/>			
RELATIONSHIP	<input type="text" value="{relationship}"/>			
ADDRESS :	CHIEF	<input type="text" value="{chief_name}"/>		
	VILLAGE	<input type="text" value="{village}"/>		
	GOMBOLOLA	<input type="text" value="{gombolola}"/>		
	AREA	<input type="text" value="{parish}"/>		
	DISTRICT	<input type="text" value="{district_id}"/>		

PERSONAL DESCRIPTION

AGE ON ADMISSION	<input type="text" value="18"/>
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COLOUR OF HAIR				
NATIONALITY	Uganda			
PLACE OF BIRTH	dfgdfg			
OCCUPATION :	TRADE	Artist		
	EMPLOYED AT TIME OF CONVICTION?	{employed}		
	IN OWN EMPLOYMENT?			
	UNEMPLOYED?	{employed}		
DESCRIPTION MARKINGS ON BODY				

PARTICULARS OF LETTERS, VISITS, PETITION, APPEAL, TRANSFERS OR UNUSUAL OCCURRENCES

ADMISSION	DOES NOT WISH TO APPEAL		
	No		

LABOUR ALLOCATION

	MEDICAL HISTORY	PRISON NUMBER	CEND0000130/18	
DATE	PARTICULARS	MEDICAL OFFICER'S SIGNATURE		
	PREVIOUS CONVICTIONS	C.R.O. Number		
DATE	SENTENCE	OFFENCE	COURT	PRISON
30-11--0001	Sentence- 70	Abduction	Chief Magistrate Court	Central Region

RECORD OF OFFENCE AND PUNISHMENT

DATE

SUPERINTENDENT'S SIGNATURE

PARTICULARS OF AFTER-CARE ASSISTANCE