LONG SENTENCE PRISONER'S RECORDrisons Form 3

General Register No. RPKC0000011/19
Tribe Alur
Serial No. 420
Name Applicationtocourt Appeal
Place of Birth
Age of Conviction 38
Married or Single Separated
Number of Children (if any)
Occupation when free Business Men
Employed or not Private Sector
Address at time of arrest (village) N/A
(Parish) N/A
(Sub County) N/A
(County) N/A
(District) N/A
Name and address of next of kin gigj ghjgh jghjghj,
Relationship Cousin
Tel. No. of next of Kin
Place crime committed N/A
Date

Court Gulu, Attanga

Sentence Sentence- 539,Sentence- 540
Standard of education No school
Religion Hinduism
MEDICAL EXAMINATION ON RECEPTION
PARTICULARS OF AFTER CARE
Date 01-12-2018
Aakash
Medical officer
STATEMENT SHOWING TRADE FOLLOWED AT EACH PRISON

Prison	Date	Trade or occupation	Supt's initials

RECORD OF PREVIOUS CONVICTIONS

C.R.O. No

Sentence	Court	Place	Date	€	Crime	Name	Prisons in which undergone
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Sentence	Court	Place	ı	Date)	Crime	Name	Prisons in which undergone
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Date when			He	ight				
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	ON	I DISCHARGE (If Sentence Over 7	7 Years)
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		MEDI	CAL HIS	TORY SHE	ET	
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Re-vaccina				 Medical officer		Prison
Has had sr	nallpox 			Date		•
State of he	alth, specia	al, remarks	enter your	(to be complete	ed in cases of light labo	ur only)
text here						
RI	ECORD O	F ADMISS		SPITALS, ACC IATIONS	IDENTS, SPECIAL	
enter your te	ext here					
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	EXA	MINATION	PRIOR TO	DISCHARGE-	REMARKS	
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Date						
Medical C	Officer					
Prison						
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Date		Offence	Punishment Awarded	Supt's initials

RECORD OF PETITIONS, APPLICATIONS AND TRANSFERS

Date		Statement of Application	Reply
		 	
		 	
		 ••••••	
		 	
		 •••••	
		 	
		 	
		 -	
		 	

NEWS PAPERS REPORT OF TRIAL AND APPEAL (IF ANY)

(To be passed below) the title and date of the news papers and the name of the judge or magistrate of the court by whom the prisoner was tried to be above the report. The name of the judge or magistrate should state whether a report is available or not.

enter your text here

RECORD OF VISITS AND LETTERS

Date Due	Date Paid	Prison	Name and relationship of visitor

Date Due	Date Paid	Prison	Name and relationship of visitor
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RECORD OF VISITS AND LETTERS

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Date Due	Date Paid	Prison	Name and relationship of visitor

RECORD OF VISITS AND LETTERS

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WELFARE DETAILS AT RECEPTION BOARD

Name	
Number	
Seen by Rec	eption Board on
at	
Sex	
Age	
Married or S	ingle
Literate	

Degree of education (school attended-standard reached)							
Degree of criminality (present and previous history of crime)							
Religion							
Trade qualifications							
Trade qualifications							
Physical and mental state (to be filled by prison medical officer before the prisoner is seen by							
the reception board)							
History since last imprisonment (if any) previous action taken by prison authorities ie: after							
care							
Notes from the previous records (if any re-disciplinary offences medical history special-							
occurrences)							
Recommendation regarding classification							
Instructions reposting with any special recommendation from the board							
[continued overleaf]							
WELFARE DETAILS AT RECEPTION BOARD - CONTINUED							
Number of children, sex ages							
Who are dependant members of prisoner's family and where are they now living?							
What income is there?							
Do dependants or prisoners own land or property?							
Does the board consider an investigation bby welfare officer necessary?							
Has prisoner any salary or debts owing to him or property with police?							
Does prisoner or his family owe money as the result of his imprisonment?							
Any further details							
Date							
DISCHARGE BOARD SUMMARY Officer I/C							
(To be completed three months before the month of discharge)							
Prison							

Name (in full)	
Superintendent	
Former employment	
Address on discharge in non fixed, state town to which proceeding	
What he wishes to do	
Any offer of help or employment	
Vocational and spare time training	
General remarks and suggestions for after care	
Amount of private cash	
Earliest date of discharge	
Licence expires (if has any)	
Date	·····
	Superintendent
	[continued overleaf]
Discharge board summary-conti	nued
Superintendent's opinion and recommendation	
Date	
	Superintendent

Discharge Interview

(To be filled by D.P.A.S. representative unless other instructions are given)

Address on discharge

What he wishes to do

Help required

Appea	rance				
Date		 	 		
				•	
				Signat	ure

To see welfare officers or labour exchange

DISPOSAL ON RELEASE

Date)	Whether on licence, under supervision pardon, remission, or expiration of sentence or death, etc	Licence number	Date of expiration licence on of licence number of supervision	Destination
			•••••			

PARTICULARS OF AFTER-CARE