

LONG SENTENCE PRISONER'S RECORD			PRISION FORM 3	
General Register No:	CENC0000220/18		Serial No:	229
Name :	Gerald Kagwa Salongo		Age on conviction	40
Place of birth :	Masaka		Married or Single	Married
Occupation when free :	Engineer		Number of Children (if any):	0
Employed or not :	{employed}			
Address at time of arrest :	CHIEF			
	VILLAGE	Tomerami		
	GOMBOLOLA			
	AREA			
	DISTRICT	Masaka		
Name and Address of next of kin :			Relationship :	Father
Crime of which convicted :	Adulteration of food or drink			
Place crime committed :			Date:	12-03-1998
Court :	Chief Magistrate Court		Sentence :	12-03-1998
Standard of Education :	Tertiary		Religion :	

## MEDICAL EXAMINATION ON RECEIPTION

, Height(feet.) : , Weight(Kg.) : , TB : , HIV : , Mental case :

Date :

Medical Officer :

COLOUR OF HAIR

Curly Hairs

NATIONALITY

Uganda

PLACE OF BIRTH

Masaka

OCCUPATION :

TRADE

EMPLOYED AT TIME OF  
CONVICTION?

IN OWN EMPLOYMENT?

UNEMPLOYED?

DESCRIPTION MARKINGS ON  
BODY

## STATEMENT SHOWING TRADE FOLLOWING AT EACH PRISON

Prisons	To	Trade of Occupation	Supt's Initials

RECORD OF PREVIOUS CONVICTIONS	C.R.O No					
Station	Court	Place	Date	Crime	Name	Prison s in which Under gone
Central Region	Chief Magistrate Court		12-03-19 98	Adulterati on of food or drink	Gerald Kagwa Salongo	Central Region

DESCRIPTION OF PRISONER							
Date when description taken	Build	Weigh t	Heigh t	Com plexi on	Hair	Eye	Skin
	Health y		7 .0		Curly Hairs	Big eyes	

DISTINCTIVE MARKS OF PRISONER

HEAD

RIGHT SIDE

LEFT SIDE

PHOTOGRAPH

ON RECEPTION

ON DISCHARGE(If sentence over 7 years)



### SPECIAL REMARKS

The following are subject to which special attention should be called for the information of the Authorities of prisons, viz, a administrations or denials of previous convictions, escapes or attempts to escape specious circumstances connected with visits, correspondence, corporal punishment, violent conducts, any peculiar mental or bodily condition requiring special treatment. Attempts to commit suicide or bodily injuries, whether convicted at the same time and place jointly with other prisoners, giving the General Register Number and names of the latter with their relationship, if any. Every entry to be concise and in order of date. Escapes, attempts to escape and any peculiar mental or bodily condition requiring special treatment should be entered in red ink.

Date	Prison	Subject of Remarks	Supt's Initial

### RECORD OF SCHOOL AND CLASSES

Date	Prison	Subject of Remarks	Supt's Initial

### MEDICAL HISTORY SHEET

Vaccinated

Fit to work as

Re-vaccinated		Medical officer	
Has had smallpox		Date	
State of health, special remarks		(To be completed in case of Light Labour only)	

**RECORD OF ADMISSIONS TO HOSPITAL, ACCIDENTS, SPECIAL EXAMINATIONS**

**Record of admissions to hospital, accidents, special examinations - Continued**

**Examined prior to discharge – Remarks:**

Date :		Medical Officer :	
A/C No	UG/0000000092/18	PROPERTY BOOK No	UG/0000000092/18

RECORD OF SUPPLEMENTARY CASH, ETC				
Date	Amount	IN or OUT	Supplementary property Book Folio No.	Initials of Officer in Charge

No:	CENC0000220/18
Name:	Gerald Kagwa Salongo

**Sentence:**

**years:**

**Period In days:**

**Date of commencement:**

**Date due for periodical review:**

**Date of expiration:**

**Treated as appellant:**

**Earliest possible date for  
release:**

**Examined:**

**Date:**

{year}

{days}

12-03-1998

20-03-2006

20-09-2018

#### FORFEITURE OF REMISSION

Date	Days forfeited	Date	Days forfeited
Actual date of release			
Examined prior to release			

#### PROGRESS IN STAGE

Stage	Date	Remarks
Stage II	13-09-2017	Stage Assigned

PROGRESS IN STAGE			
Date	Offence	Punishment Awarded	Supt's Initials

### NEWSPAPER REPORT OF TRIAL AND APPEAL (IF ANY)

(To be pasted below) The title of the date of the newspaper, and name of the Judge of Magistrate of the court by whom the prisoner was trial to be inserted above the report. The name of the Judge of Magistrate should be stated whether a report is available or not

RECORD OF VISITS AND LETTERS			
Date Due	Date Paid	Prices	Name and Relationship of Visitor

### WELFARE DETAILS AT RECEPTION BOARD

Name :	Gerald Kagwa Salongo	Number :	CENC0000220/18
Seen by Reception Board on :	{seen_by_reception}	at :	

Sex :	Male	Age :	40
Married (or) Single :	Married	Literate :	Yes
Degree of education (school attended – standard reached) :	Tertiary		
Religion :			
Physical and Mental state (to be filed by Prisons Medical Officer before the prisoner is seen by Reception Board) :			
History since last imprisonment (if any) previous action taken by prison authorities i.e. After care :			
Note from previous records (if any re disciplinary offences, medical history special occurrences) :			
Recommendation regarding classification :	Star		
Instructions reposition with any special recommendations from the Board :			
Number of children, sex, ages :			
Who are dependent members of prisoner's family and where are they living :			
What income is there :			
Do dependents of prisoner own land or property :			
Does the Board consider an investigation by Welfare Officer necessary :			
Has prisoner any salary or debts owing to him or property with police :			
Does prisoner, or his family own money as the result of his imprisonment :			
Any further details :			
Date :		Officer in charge :	



## DISCHARGE BOARD SUMMARY

*To be completed three months before the month of discharge*

**Prison :**

Central Region

**Name (In full) :**

Gerald Kagwa Salongo

**Superintendent :**

**Former employment :**

**Address on discharge if none fixed, state town to which proceeding :**

**What he wishes to do :**

**Any offer of help or employment :**

**Vocational and spare time training :**

**Amount of previous cash :**

**Earliest date of discharge :**

**Licence expires (If has any) :**

**Date :**

**Officer in charge :**

**Superintendent's opinion and recommendation :**


Date :

Superintendent :

**Disposal on Release**

Date	Whether on Licence, Under Supervision, Pardon, Remission, or Expiration of Sentence or Death, etc.	Licence Number	Date of Expired on Licence or Supervision	Destination
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**PARTICULARS OF AFTER – CARE**