

PRE-TRIAL INMATE REVIEW REPORT

Institution Unit

1. Name 2. Reg. No. 3. Date

4. Initial Pre-Trial Review Date 5. Inmate Present (Yes/No)

6. Key Indicators/Considerations: The following items were considered or reviewed during your Pre-Trial Review.

Separation Needs _____ Media Interest _____

Work _____ Counseling _____

Quarters _____ Detainers _____

Intake Screening & other Pre-trial notification forms _____ Behavioral Adjustment Custody _____

Education/VT _____ Mental/Physical Health _____

Religious Programming _____ Visiting _____

Recreation _____ Bail Status _____

Court Status _____

7. Next Court Date: _____ 8. Asst U.S. Atty: _____

9. Team Comments: (To include changes in present status)

10. Signatures: _____ Date of next review: _____

Team Chairperson Inmate Date

cc: Inmate File