

PS 5280.08 Furloughs



Change Notice

DIRECTIVE AFFECTED: 5280.08
CHANGE NOTICE NUMBER: 5280.08
DATE: 2/4/98

1. PURPOSE AND SCOPE. To reissue the Program Statement on Furloughs.
2. SUMMARY OF CHANGES. This reissuance incorporates text developed by the Office of General Counsel consistent with the recently issued Program Statement on Categorization of Offenses. In addition, textual and procedural improvements recommended by field and Regional Office staff have also been incorporated.

These changes are summarized below:

- ! Incorporates Categorization of Offenses language;
 - ! Authorizes inmates at low security level facilities to transfer to a minimum security level facility via unescorted transfer;
 - ! clarifies post-furlough interview procedures; and
 - ! replaces "furlough transfer" with "unescorted transfer" throughout the policy.
3. ACTION. File this Change Notice in front of PS 5280.08, Furloughs.

/s/
Kathleen M. Hawk
Director



Program Statement

OPI: CPD
NUMBER: 5280.08
DATE: 2/4/98
SUBJECT: Furloughs

Rules Effective Date: November 28, 1994

1. [**PURPOSE AND SCOPE** §570.30. The furlough program of the Bureau of Prisons is intended to help the inmate to attain correctional goals. A furlough is not a right but a privilege granted an inmate under prescribed conditions. It is not a reward for good behavior, nor a means to shorten a criminal sentence.]

Authority to grant furloughs to inmates whose offenses occurred before November 1, 1987 was given to the Attorney General under 18 U.S.C. §4082(c) and has been redelegated to the Director, Bureau of Prisons in 28 CFR 0.96(d). Under 18 U.S.C. §3622, the Director has authority to grant furloughs to inmates whose offenses occurred on or after November 1, 1987.

A furlough may be authorized within the United States, and those possessions and territories in which the United States Government retains jurisdiction (Guam, Puerto Rico, Virgin Islands). The Regional Director for the sending institution must approve all furloughs to Guam, Puerto Rico, or the Virgin Islands. Ordinarily, the length of an overnight furlough approved by the Bureau of Prisons is three to seven calendar days. The 30 day furlough specified in 18 U.S.C. §§3622 and 4082 is used primarily to meet medical, educational, or vocational needs.

2. PROGRAM OBJECTIVES. The expected results of this program are:

a. Furloughs will be granted to eligible inmates to attain specific correctional goals.

[**Bracketed Bold - Rules**]

Regular Type - Implementing Information

b. Each furlough will be approved by the proper authorities, depending on the type of furlough, the characteristics of the inmate, and his or her criminal history.

c. The public will be protected from undue risk.

d. Any inmate who violates a condition of furlough will be disciplined, depending on the nature of the violation.

3. DIRECTIVES AFFECTED

a. Directive Rescinded

PS 5280.07 Furloughs (6/23/95)

b. Directives Referenced

PS 5100.06 Security Designation and Custody
Classification Manual (6/7/96)
PS 5162.04 Categorization of Offenses (10/9/97)
PS 5180.04 Central Inmate Monitoring System (PS only)
(8/16/96)
PS 5250.01 Public Works and Community Service Projects
(1/19/93)
PS 5270.07 Inmate Discipline and Special Housing Units
(12/29/87)
PS 5380.05 Financial Responsibility Program, Inmate
(12/22/95)
PS 5500.09 Correctional Services Manual (10/27/97)
PS 5521.05 Searches of Housing Units, Inmates, and
Inmate Work Areas (6/30/97)
PS 5550.05 Escape from Extended Limits of Confinement
(3/27/96)
PS 6190.02 Infectious Disease Management (10/3/95)
PS 7331.03 Pretrial Inmates (11/22/94)

c. United States Code Referenced

18 U.S.C. §751, Prisoners in custody of institution or officer.

18 U.S.C. §3622, Temporary release of a prisoner (applicable to inmates whose offenses occurred on or after November 1, 1987 - the Comprehensive Crime Control Act (CCCA)).

18 U.S.C. §4082, Commitment to Attorney General; residential treatment centers; extension of limits of confinement; work furlough (applicable to inmates whose offenses occurred before November 1, 1987).

d. Rules cited in this Program Statement are contained in 28 CFR 570.30-37.

e. Rules referenced in this Program Statement are contained in 28 CFR 0.96 and 28 CFR Part 2, (Parole, Release, Supervision and Recommitment of Prisoners, Youth Offenders, and Juvenile Delinquents).

4. STANDARDS REFERENCED

a. American Correctional Association 3rd Edition Standards for Adult Correctional Institutions: 3-4389, 3-4390, 3-4443, and 3-4444;

b. American Correctional Association 3rd Edition Standards for Adult Local Detention Facilities: 3-ALDF-4G-04, 3-ALDF-4G-05, 3-ALDF-4G-06, 3-ALDF-5D-13, and 3-ALDF-5D-14;

c. American Correctional Association 2nd Edition Standards for Administration of Correctional Agencies: None; and,

d. American Correctional Association Standards for Adult Correctional Boot Camp Programs: 1-ABC-4G-03, 1-ABC-4G-04, and 1-ABC-4G-05.

5. PRETRIAL PROCEDURES. Staff should refer to Section 10(e) and the Program Statement on Pretrial Inmates concerning furlough procedures for pretrial inmates.

6. DEFINITIONS §570.31

a. A furlough is an authorized absence from an institution by an inmate who is not under escort of a staff member, U.S. Marshal, or state or federal agents. The two types of furloughs are:

(1) Day Furlough. A furlough within the geographic limits of the commuting area of the institution (approximately a 100-mile radius), which lasts 16 hours or less and ends before midnight.]

Day furloughs are generally used to strengthen family ties and to enrich specific institution program experiences. Such trips are frequently associated with inmate organizations inside the institution (Jaycees, Toastmasters, etc.) or with programs (Religion, Education, Recreation, etc).

[(2) Overnight Furlough. A furlough which falls outside or beyond the criteria of a day furlough.

b. An anticipated release date, for purposes of this rule, refers to the first of the following dates which applies to an inmate requesting a furlough:

(1) The inmate's mandatory (statutory) release date;]

For an inmate sentenced under the CCCA, the Good Conduct Release date is considered the "statutory" release date. Release dates established under §§ 3621(e) and 4046(c) will be considered as the "statutory" release date.

[(2) The inmate's minimum expiration date;

(3) The inmate's presumptive parole date; or

(4) The inmate's effective parole date.]

7. [JUSTIFICATION FOR FURLOUGH §570.32

a. The authority to approve furloughs in Bureau of Prisons institutions is delegated to the Warden or Acting Warden. This authority may not be further delegated. An inmate may be authorized a furlough:]

While the Warden may not further delegate his or her authority to approve furloughs, the Regional Director may authorize selected satellite camp administrators to approve furloughs for inmates at that camp. This authorization is to be made on the basis of the satellite camp administrator's correctional experience and, for the purpose of this section, is authorized under the provisions of 28 CFR 500.1(a) which defines the Warden as the Chief Executive Officer of any federal penal or correctional institution.

[(1) To be present during a crisis in the immediate family, or in other urgent situations;]

Immediate family includes mother, father, step-parents, foster parents, brothers and sisters, spouse, and children.

[(2) To participate in the development of release plans;

(3) To reestablish family and community ties;

(4) To participate in selected educational, social, civic, religious, and recreational activities which will facilitate release transition;

(5) To transfer directly to another institution or to a non-federal facility;]

Note: Examples in this subsection are technically defined as furloughs; however, they are actually unescorted transfers in which furlough paperwork is completed.

An inmate may transfer via unescorted transfer to a Community Corrections Center (CCC) from a Bureau institution or from another contract facility. Inmates may also transfer from one Bureau low or minimum security level institution directly to another Bureau minimum security level institution. Other unescorted transfers occur when:

(a) For initial designation, inmates are in "holdover" status and:

- # a minimum security institution is designated for the inmate; and,
- # he or she is a minimum security level inmate when designated.

(b) For redesignations, an inmate:

- # is awaiting movement after being redesignated from a low or minimum security level institution (including administrative facilities which house designated cadre inmates); and,
- # is a minimum security level inmate at the time of redesignation.

(c) An inmate has been authorized an unescorted transfer to or from a medical referral center and;

- # the Warden determines the inmate to be physically and mentally capable of completing a furlough;
- # the inmate has demonstrated sufficient responsibility to provide a reasonable assurance that furlough requirements would be met.

[(6) To appear in court in connection with a civil action;

(7) To comply with an official request to appear before a grand jury, or to comply with a request from a legislative body or regulatory or licensing agency;

(8) To appear in a criminal court proceeding, but only when the use of a furlough is requested or recommended by the applicable court or prosecuting attorney; or

(9) To participate in special training courses or in institution work assignments including Federal Prison Industries (FPI) work assignments, of 30 calendar days or less, when daily commuting from the institution is not feasible.]

This subsection refers to any inmate who remains overnight at the training/work site and does not return to the institution daily.

Questions about these guidelines may be referred to the Regional Counsel.

[b. The Warden may recommend a furlough for an inmate to obtain necessary medical, surgical, psychiatric, or dental treatment not otherwise available. In addition to the recommendation of the Warden, a furlough of this nature requires the recommendation of the Chief Medical Officer (Chief of Health Programs). Approval for a furlough of this type occurs in one of the following ways:

(1) Staff shall contact the Regional Health Services Administrator for approval when the cost of medical care is at the expense of the government. In case of medical emergency, staff may authorize a furlough for hospitalization and shall notify the Regional Health Services Administrator as soon after the emergency admission as possible.

(2) When medical care expenditures are borne by the inmate, or other non-governmental source, the furlough request requires the approval of the Medical Director and the Assistant Director, Correctional Programs Division.

For inmates confined in a CCC, CCMs will follow the procedures outlined in the CCM Manual and consult with the Regional Health Services Administrator for direction, (or the Medical Director and the Assistant Director, Correctional Programs Division if the expenditures are borne by the inmate) prior to approving a furlough request for medical treatment.

c. The Warden may refer a request for a furlough in other situations through the Regional Director to the Assistant Director, Correctional Programs Division, for approval.]

8. [EXPENSES OF FURLOUGH §570.33

a. Except as provided in paragraphs b. and c. of this section, the inmate or the inmate's family or other appropriate source approved by the Warden shall bear all expenses of a furlough, including transportation, food, lodging, and incidentals.

b. The government may bear the expense of a furlough only when the purpose of the furlough is to obtain necessary medical, surgical, psychiatric, or dental treatment not otherwise available, or to transfer an inmate to another correctional institution (includes community corrections centers), or, if it is for the primary benefit of the government, to participate in special training courses or institutional work assignments (including FPI work assignments) as outlined in §570.32(a)(9).]

Section 570.32(a)(9) refers to Section 7.a.(9) of this Program Statement.

[c. The Warden may allow an inmate scheduled for transfer to a community corrections center (CCC) to choose the means of transportation to the CCC if all transportation costs are borne by the inmate. An inmate traveling under these provisions is expected to go directly from the institution to the CCC.]

Inmates choosing and paying for their own mode of transportation are not permitted to deviate from the unescorted transfer schedule.

9. **[ELIGIBILITY REQUIREMENTS §570.34**

a. Except as provided in paragraph b. of this section, the Warden may grant a furlough only to an inmate with community custody.

b. The Warden may grant a furlough to an inmate with "out" custody only when the furlough is for the purpose of transferring directly to another institution (except community corrections centers)] (since community custody is required when transferring to a CCC) [or for obtaining local medical treatment not otherwise available at the institution.] (The local medical treatment ordinarily will not exceed one day.)

An inmate granted a furlough for the purpose of transferring directly to another institution or a CCC shall not ordinarily be permitted to travel with other inmates. The Warden may grant specific approval to two or more inmates traveling together via unescorted transfer after the Warden has determined:

(1) There are no alternative transportation arrangements available which will not place a significant financial burden on the institution or the inmates, or significantly delay the inmates' unescorted transfers.

(2) The transportation arrangements for two or more inmates traveling together are such that the inmates have limited opportunities for inappropriate behavior (e.g., the method of transportation is direct with few, if any, stops prior to reaching the final destination).

[c. The Warden may grant a furlough only to an inmate the Warden determines to be physically and mentally capable of completing the furlough.

d. The Warden may grant a furlough only to an inmate who has demonstrated sufficient responsibility to provide reasonable assurance that furlough requirements will be met.

e. The Warden shall determine the eligibility of an inmate for furlough in accord with the inmate's anticipated release date and the basis for the furlough request.

(1) The Warden may approve only an emergency furlough (family crisis or other urgent situation) for an inmate who has

been confined at the initially designated institution for less than 90 days.

(2) The Warden may approve only an emergency furlough for an inmate with more than two years remaining until the inmate's anticipated release date.

(3) The Warden may approve a day furlough for an inmate with two years or less remaining until the inmate's anticipated release date.

(4) The Warden may approve an overnight furlough within the institution's commuting area for an inmate with 18 months or less remaining until the inmate's anticipated release date.

(5) The Warden may approve an overnight furlough outside the institution's commuting area for an inmate with one year or less remaining until the inmate's anticipated release date. The Warden may ordinarily approve an overnight furlough not to exceed once each 90 days.

(6) If the Warden approves a furlough outside the above guidelines, the Warden shall document the reasons in the inmate's central file.]

(7) Sentenced Federal holdovers shall not automatically be precluded from furlough consideration.

10. [LIMITATIONS OF ELIGIBILITY §570.35

a. The Warden ordinarily may not grant a furlough to an inmate convicted of a serious crime against the person and/or whose presence in the community could attract undue public attention, create unusual concern, or depreciate the seriousness of the offense. If the Warden approves a furlough for such an inmate, the Warden must place a statement of the reasons for this action in the inmate's central file.]

Examples of inmates who have been convicted of a serious crime against a person, whose presence in the community could attract undue public attention, create unusual concern, or depreciate the seriousness of the offense include an inmate who:

(1) Has a current or prior offense listed in the Program Statement on Categorization of Offenses. In accord with that

Program Statement, an inmate will ordinarily be precluded from receiving a furlough if he or she has an offense listed in either Section 6, Offenses Categorized As Crimes of Violence, or Section 7, Offenses That At the Director's Discretion Shall Preclude An Inmate's Receiving Certain Bureau Program Benefits. Other offenses, current or prior, may preclude an inmate from receiving a furlough at the Warden's discretion.

(2) Has been assigned a Public Safety Factor (PSF), and the Regional Director has not waived the PSF.

(3) Refuses to participate in the Inmate Financial Responsibility Program or is not making payments commensurate with ability to pay (see the Program Statement on Financial Responsibility Program, Inmate). This limitation also includes inmates who withdraw from studies prior to receiving their GED, or refuse to participate in required drug abuse treatment or the Release Preparation Program.

(4) Was found to have used drugs or alcohol in an institution by a disciplinary hearing process within the past two years.

(5) Has a prior history of escape or attempted escape from secure custody.

Furloughs for inmates in subsections (1) and (2) above shall be considered only in highly unusual circumstances and require the Regional Director's prior written approval. However, the Regional Director's review of a proposed furlough is not necessary for inmates assigned PSFs that have been waived. A furlough request for CCC inmates assigned PSFs will be reviewed and approved by the Community Corrections Regional Administrator.

Ordinarily, the Warden shall consult with the Regional Director prior to approving a furlough for an inmate in subsections (3) through (5) as an exception to the criteria in subsection a. above.

Notwithstanding any particular current or prior offense, inmates approved for CCC placement do not require the Regional Director's prior written approval for unescorted transfer to CCC placements. Likewise, waiver of a Public Safety Factor is not required for inmates transferring via unescorted transfer to CCC placements.

[b. The Warden may approve a furlough for an inmate classified

as a central monitoring case upon compliance with the requirements of this rule and the requirements of Part 524, Subpart F.]

Part 524, Subpart F refers to the Program Statement on the Central Inmate Monitoring System.

[c. Staff at a contract facility may approve a furlough for a sentenced inmate housed in the contract facility as specified in that facility's written agreement with the Bureau of Prisons.]

Contract staff shall follow the procedures outlined in the facility's written agreement with the Bureau of Prisons. The CCM is available to answer questions on these cases.

[d. The Bureau of Prisons does not have the authority to furlough U.S. Marshals prisoners in contract jails. Staff are to refer requests for such furloughs to the U.S. Marshals.

e. Furloughs for pretrial inmates will be arranged in accordance with the rule on pretrial inmates (see Part 551, Subpart J).]

Part 551, Subpart J refers to the Program Statement on Pretrial Inmates.

f. The Warden may not ordinarily grant a furlough to an inmate with a detainer.

11. **PROCEDURES §570.36**

a. An inmate who meets the eligibility requirements of this rule may submit to staff an application for furlough.]

In accord with the Program Statement on Infectious Disease Management, an inmate ordinarily must be tested for the HIV antibody. Refusal to be tested shall be grounds for denying furlough participation. The Unit Manager must provide the Health Services Administrator with the names of inmates being considered for furlough.

[b. Before approving the application, staff shall verify that a furlough is indicated.]

The inmate's team is to contact the family member or person

being visited and determine if a furlough is indicated. When contacting the family member or person being visited, staff shall ensure the inmate is welcome in that home. This communication must be documented and placed in the inmate central file.

Prior to the inmate's first furlough, a questionnaire (form BP-302) shall be forwarded to the Chief U.S. Probation Officer (USPO) in the district of sentencing. A questionnaire (form BP-303) shall also be forwarded to the Chief, USPO in the district to be visited but only for the first furlough to that district. When the sentencing district and the receiving district are the same, form BP-303 shall be used.

(Note: For inmates sentenced in D.C. Superior Court, form BP-303 is to be forwarded to the Chief, USPO, Washington, DC.

When an inmate sentenced in DC Superior Court desires to visit another judicial district, BP-302 is to be sent to the Deputy Compact Administrator, Social Services Division, DC Superior Court, 409 E Street NW, Washington DC 20001).

If form BP-303 and/or Form BP-302 are not returned within two weeks, the unit team shall contact the appropriate USPO(s) to determine the status of the request. If the form(s) is not returned within one week after this contact, unit staff may proceed to process the furlough. If the USPO(s) recommends against the furlough, the Warden may grant the furlough but must document the reason(s), and provide a memorandum to the Chief USPO(s) advising of this final decision. A copy of this memorandum shall be placed in the inmate central file.

Furlough approval is made on the standard furlough form BP-291. Each furlough must be routed through the Inmate Systems Management department for a final detainer and legal status check prior to delivery to the Warden. Four copies (original plus three carbon copies) of the furlough approval and record shall be completed and distributed, after the Warden's signature, as indicated on the bottom of the form.

If the Warden and Chief USPO in the local district concur, a blanket approval memorandum for all or specific types of furloughs may be used in lieu of the BP-302 and/or BP-303. This approval memorandum requires the signature of both the Chief USPO and Warden, and must be reviewed and re-signed by both parties biennially.

A separate furlough application shall be executed for each

furlough occurrence; however, when a furlough is needed for an extended period of time on a recurrent basis, processing more than one furlough application for each inmate and occurrence may not be feasible. Then, the Warden may forward an exemption request to the Regional Office.

The Regional Director shall review the reasons for the request, and send a memorandum to the Warden that either approves or denies the exemption. If approved, staff shall complete one furlough application which shall expire at the conclusion of the activity and/or one year after Regional Office approval. If an exemption is still required upon expiration of the year, refer to the above paragraph for instructions.

For medical furloughs, staff at all camps are not required to submit USPO questionnaires, VWP notifications, or exception memorandums.

[c. Staff shall notify an inmate of the decision on the inmates's application for furlough. Where an application for furlough is denied, staff shall notify the inmate of the reasons for denial.]

If the furlough is approved, the staff member releasing the inmate on the furlough is to ensure that the inmate's mode of transportation is the same as listed on the furlough form.

[d. Each inmate who is approved for a furlough must agree to abide by the specified conditions of the furlough.]

See the conditions page of form BP-291 for a standard list of furlough conditions. These conditions are to be applied to all inmates going on furlough. Each Warden may establish additional furlough conditions as warranted. Additional conditions are to be shown on the standard list under the heading "special instructions".

[e. Upon completion of an inmates's furlough, staff shall record in the inmate's central file anything unusual which occurred during the furlough.]

The Correctional Counselor is to interview each inmate returning from a non-medical furlough to determine if the furlough conditions were met. However, if the Correctional Counselor believes or learns of anything unusual occurring during

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either a medical or non-medical furlough, then he or she must contact the appropriate community resource (e.g., USPO, medical

facility, family) for further information. Results of information obtained from the inmate, as well as any contacts are to be reported to the unit team, and recorded in the inmate central file.

Post-furlough interviews shall be conducted in conjunction with scheduled program reviews, and not immediately after a furlough.

12. [VIOLATION OF FURLOUGH §570.37. An inmate who absconds from furlough or fails to meet any of the conditions of the furlough is deemed to be an escapee under 18 U.S.C. 4082, 751.]

If an escapee is sentenced under the provisions of the Comprehensive Crime Control Act of 1984, Title 18 U.S.C. 751 also applies.

[a. Staff shall process as an escapee an inmate who absconds from furlough.

b. Staff may take disciplinary action against an inmate who fails to comply with any of the conditions of the furlough.]

See the Program Statement on Inmate Discipline and Special Housing Units.

13. REPORTING PROCEDURES. Escapes or serious incidents while on furlough should be reported via Groupwise as soon as practicable to the Central Office and Regional Correctional Services Administrators. For further information, refer to the Correctional Services Manual and to the Program Statement on Escape from Extended Limits of Confinement.

14. INSTITUTION SUPPLEMENT. Each Warden shall develop an Institution Supplement detailing procedures and conditions for furloughs, consistent with the institution mission. This Institution Supplement should specify, if applicable:

a. Any cooperative arrangements with outside agencies, such as the U.S. Probation Office or local medical facility;

b. Transportation and/or administrative procedures to facilitate an inmate's furlough release and return (address how to process an inmate returning from furlough during non-business hours); and,

c. Procedures for inmates to transfer from the institution to a CCC via unescorted transfer;

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A copy of the Institution Supplement is to be sent to the
Regional Correctional Programs Administrator.

/s/
Kathleen M. Hawk
Director

[Table I
Conditions of Furlough

1. I will not violate the laws of any jurisdiction (federal, state, or local). I understand that I am subject to prosecution for escape if I fail to return to the institution at the designated time.
2. I will not leave the area of my furlough without permission, with the exception of traveling to the furlough destination, and returning to the institution.
3. While on furlough status, I understand that I remain in the custody of the U.S. Attorney General. I agree to conduct myself in a manner not to bring discredit to myself or to the Bureau of Prisons. I understand that I am subject to arrest and/or institution disciplinary action for violating any condition(s) of my furlough.
4. I will not purchase, possess, use, consume, or administer any narcotic drugs, marijuana, intoxicants in any form, nor will I frequent any place where such articles are unlawfully sold, dispensed, used, or given away.
5. I will not use any medication that is not prescribed and given to me by the institution medical department for use or prescribed by a licensed physician while I am on furlough. I will not have any medical/dental/surgical/psychiatric treatment without the written permission of staff, except where an emergency arises and necessitates such treatment. I will notify institution staff of any prescribed medication or treatment received in the community upon my return to the institution.
6. I will not have in my possession any firearm or other dangerous weapon.
7. I will not get married, sign any legal papers, contracts, loan applications, or conduct any business without the written permission of staff.
8. I will not associate with persons having a criminal record or with those persons who I know are engaged in illegal occupations.
9. I agree to contact the institution (or United States Probation Officer) in the event of arrest, or other serious difficulty or illness.
10. I will not drive a motor vehicle without the written permission of staff. I understand that I must have a valid driver's license and sufficient insurance to meet any applicable financial responsibility laws.

11. I will not return from furlough with any article I did not take out with me (for example, clothing, jewelry, or books). I understand that I may be thoroughly searched and given a urinalysis and/or breathalyzer and/or other comparable test upon my return to the institution. I understand that I will be held accountable for the results of the search and test(s).

12. Special Instructions:

I have read, or had read to me, and I understand the above conditions concerning my furlough and agree to abide by them.

Inmate's Signature: _____ Reg. No.: _____

Date: _____

Signature/Printed Name of Staff Witness: _____

_____]

Form BP-S291(52) contains, as a Special Instruction for all furloughs, the following Condition 12: "It has been determined that consumption of poppy seeds may cause a positive drug test which may result in disciplinary action. As a condition of my participation in community programs, I will not consume any poppy seeds or items containing poppy seeds." Other Special Instructions may be established as warranted.

BP-S302.052 FURLOUGH QUESTIONNAIRE - SENTENCING DISTRICT CDFRM

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U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS



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TO: U.S. Probation Officer (address)

* From: Federal Bureau of Prisons (address)

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)

Inmate Name:

* Register No.:

*
*

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Docket No.: (PDID No., if applicable)*

* Date of Birth:

*
*

)

Date: _____

The above named inmate has been sentenced from your district and is presently confined at _____
This individual is requesting a furlough to the following district: _____

We have forwarded a questionnaire to the United States Probation Officer in that district.

In compliance with Bureau of Prison's Program Statement on furloughs, we are also forwarding this questionnaire for the needed responses. Please return this form to this institution within two weeks from receipt.

)

Inmate's Residence while on Furlough:

* Telephone Number while on Furlough:

*
*
*

)

Date and Purpose of Furlough:

)

(Signature) Unit Staff

)

)

Please indicate your response to the following questions:

1. Are there any objections from you, law enforcement agencies or the court to the inmate furloughing to the at _____NO _____Yes

2. If subsequent furloughs are granted, do you wish to be notified? _____NO _____YES

ADDITIONAL COMMENTS:

(Signature) U.S. Probation Officer

(Date)

*Note: For D.C Superior Court cases, add PDID No., if known.

(This form may be replicated via WP)

Replaces BP-302(52) of MAY 94

BP-S303.052 FURLOUGH QUESTIONNAIRE - OUT OF SENTENCING DISTRICT CDFRM

NOV 96

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

D

)

To: U. S. Probation Officer (address)

*From: Federal Bureau of Prisons

* (Address)

*

*

D

)

Inmate Name

*Register No.

*

D

)

Docket No. (PDID No., if Applicable)*

*Date of Birth

*

D

)

Date: _____

The above named inmate has requested a furlough into your district. Since this is the inmate's first furlough district, we are requesting that you complete the following questionnaire and return it to us within two weeks. questionnaire will remain on file, and it will not be required for any subsequent furlough(s).

D

)

Inmate's Residence While on Furlough

*Telephone Number While on Furlough

*

D

)

Date and Purpose of Furlough

D

)

Please indicate your response to the following questions

D

)

1. Is the proposed residence acceptable to you?

__ yes; __ no

*2. Do you believe the purpose for the furlough can be fulfilled?

* __ yes; __ no

D

)

3. Is there any objection in the community (including law enforcement {i.e., investigating agency,U.S. Attorney, local law enforcement} and/or the court) to the inmate returning on furlough?

__ yes; __ no

*4. This is the first furlough for the inmate to your district. Do you wish contact with the inmate?

* __ yes; __ no

* If so, how?

* __ Telephone; __ In Person

*

D

)

5. If subsequent furloughs are granted to your district do you wish to be notified? __ yes; __ no

D

)

6. If subsequent furloughs are granted to your district, do you wish contact with the inmate?

__ yes; __ no

*7. Do you wish a copy of the furlough order?

* __ yes; __ no

D

If so, how?

__ Telephone; __ In person

*8. Is local felon registration

* required? __ yes; __ no

D

)

Comments

D

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Attachment C

)
Signature U.S. Probation Officer *Date
*

■
)
Thank you for your cooperation. **Please return this form to:**

■
)
Unit Staff Signature/Printed Name

■
)
Unit Staff Address

■
)
*Note: for D.C. Superior Court cases, add PDID No., if known.
(This form may be replicated via WP)

Replaces BP-303(52) of APR 94

BP-S291.052 FURLOUGH APPLICATION - APPROVAL AND RECORD CDFRM
MAY 94

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

)
)
Inmate's Name * Register No. * Institution
*
*

APPLICATION

)
) Purpose of Visit * Person and/or Place to be Visited
*

)
) Date and Time of Departure * Address
*

)
) Date and Time of Return * Telephone No. (Including Area Code)

)
) Point of Contact for Emergency * Method of Transportation * Detainer/Pending Charges * Verified
Staff) *
* G Yes G No *

)
) NOTE TO APPLICANT: You are reminded that should any unusual circumstances arise during the period of your visit
notify the institution immediately at telephone:

UNDERSTANDING

)
) I understand that if approved, I am authorized to be only in the area of the destination shown above and at ord
stopovers or points on a direct route to or from that destination. I understand that my furlough only extends
my confinement and that I remain in the custody of the Attorney General of the United States. If I fail to ren
extended limits of this confinement, it shall be deemed as escape from the custody of the Attorney General, pur
provided in Section 751 of Title 18, United States Code. I understand that I may be thoroughly searched upon n
the institution and that I will be held responsible for any item of contraband or illicit material that is four
read or had read to me, and I understand that the foregoing conditions govern my furlough, and will abide by th
read or had read to me, and I understand the CONDITIONS OF FURLOUGH as set forth on the reverse of this form.

Witness

Signature of Applicant

Title

Date Signed

ADMINISTRATIVE ACTION

)
) Information Verified by * Title
*

)
) Name Of USPO Notified * Date of Notification
*

)
) Does USPO Have Any Objections to Furlough? (If so, explain)

APPROVAL

Approval for the above named inmate to leave the institution on a furlough as outlined is hereby granted in accordance with P.L. 93-209 and the BOP Furlough Program Statement. The period of furlough is from _____ to _____ .

* If activity is approved, is clearance
* **G** Yes **G** No
* Signature: _____

D
)
Chief Executive Officer (Name, Title & Date)-Signature certifies approval

RECORD

D
)
Date/Time Released: _____ Date/Time Returned: _____
Travel Schedule: _____



Inmate's Photo



Inmate's Right Thumb Print

Conditions of Furlough

1. I will not violate the laws of any jurisdiction (federal, state, or local). I understand that I am subject to prosecution for escape if I fail to return to the institution at the designated time.
2. I will not leave the area of my furlough without permission, with exception of traveling to the furlough area and returning to the institution.
3. While on furlough status, I understand that I remain in the custody of the U.S. Attorney General. I agree to conduct myself in a manner not to bring discredit to myself or to the Bureau of Prisons. I understand that I am subject to arrest and/or institution disciplinary action for violating any condition(s) of my furlough.
4. I will not purchase, possess, use, consume, or administer any narcotic drugs, marijuana, intoxicants in any form, nor will I frequent any place where such articles are unlawfully sold, dispensed, used, or given away.
5. I will not use any medication that is not prescribed and given to me by the institution medical department or prescribed by a licensed physician while I am on furlough. I will not have any medical/dental/surgical/psychiatric treatment without the written permission of staff, except where an emergency arises and necessitates such treatment. I will notify institution staff of any prescribed medication or over-the-counter medication received in the community upon my return to the institution.
6. I will not have in my possession any firearm or dangerous weapon.
7. I will not marry, sign any legal papers, contracts, loan applications, or conduct any business without the written permission of staff.
8. I will not associate with persons having a criminal record or with those persons who I know are engaged in illegal occupations.
9. I agree to contact the institution (or United States Probation Officer) in the event of arrest, or any other emergency, difficulty or illness.
10. I will not drive a motor vehicle without the written permission of staff. I understand that I must have a valid driver's license and sufficient insurance to meet any applicable responsibility laws.
11. I will not return from furlough with any article I did not take out with me (for example, clothing, jewelry, books). I understand that I may be thoroughly searched and given a urinalysis and/or breathalyzer and/or comparable tests upon my return to the institution. I understand that I will be held accountable for the results of the search and test(s).
12. It has been determined that consumption of poppy seeds may cause a positive drug test which may result in disciplinary action. As a condition of my participation in community programs, I will not consume any poppy seeds or items containing poppy seeds.
13. Special Instructions:

I have read, or had read to me, and I understand the above conditions concerning my furlough and agree to abide by them.

Inmate's Signature: _____ Reg. No.: _____ Date: _____

Signature/Printed Name of Staff Witness: _____

Conditions of Furlough - Inmate's Copy

1. I will not violate the laws of any jurisdiction (federal, state, or local). I understand that I am subject to prosecution for escape if I fail to return to the institution at the designated time.
2. I will not leave the area of my furlough without permission, with exception of traveling to the furlough location and returning to the institution.
3. While on furlough status, I understand that I remain in the custody of the U.S. Attorney General. I agree to conduct myself in a manner not to bring discredit to myself or to the Bureau of Prisons. I understand that I am subject to arrest and/or institution disciplinary action for violating any condition(s) of my furlough.
4. I will not purchase, possess, use, consume, or administer any narcotic drugs, marijuana, intoxicants in any form, nor will I frequent any place where such articles are unlawfully sold, dispensed, used, or given away.
5. I will not use any medication that is not prescribed and given to me by the institution medical department or prescribed by a licensed physician while I am on furlough. I will not have any medical/dental/surgical/psychiatric treatment without the written permission of staff, except where an emergency arises and necessitates such treatment. I will notify institution staff of any prescribed medication or treatment received in the community upon my return to the institution.
6. I will not have in my possession any firearm or dangerous weapon.
7. I will not marry, sign any legal papers, contracts, loan applications, or conduct any business without the written permission of staff.
8. I will not associate with persons having a criminal record or with those persons who I know are engaged in illegal occupations.
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10. I will not drive a motor vehicle without the written permission of staff. I understand that I must have a valid driver's license and sufficient insurance to meet any applicable responsibility laws.
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13. Special Instructions: