

BP-A311.052_Request for Conviction Information

REQUEST FOR CONVICTION INFORMATION

1. TO (Addressee)		2. FROM (Institution)	
3. Inmate's Name		4. Register No.	
5. The above named inmate of this facility has requested permission to receive visits from:			
a. Name of Potential Visitor		b. Date of Birth	
c. Social Security Number		d. Motor Vehicle Operator's I.D. - Number and State of Issuance	
e. Citizenship: _____ . If other than U.S., please provide alien registration number: number: _____			
f. Address of Potential Visitor		g. Potential Visitor's Relationship to the inmate	
h. Race of Potential Visitor <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Other _____		i. Sex of Potential Visitor <input type="checkbox"/> Male <input type="checkbox"/> Female	
6. Has this person been convicted of any criminal offense? If so, please complete the appropriate response below. An authorization to release information, signed by the person in question, is attached.			
a. Signature of Case manager	b. Institution		c. Date
c. Printed Name of Case manager			

RESPONSE

1. A search of the records of this office concerning the individual named above, who wishes to visit an inmate of a Federal Correctional Facility reveals:

No record of prior convictions.
 The following record of convictions:

1a. Date	1b. Offense	
1c. Sentence		
2. Printed Name/Signature	3. Title	4. Date
5. Agency		