

**CENTER DISCIPLINE COMMITTEE REPORT (CCC'S)**

Name of Inmate	Register Number	Hearing Date
Date of Incident	Date of Incident Report	Prohibited Act(s) Code

Summary of Charge(s)

**I. NOTICE OF CHARGE(S)**

- \_\_\_\_\_ Date \_\_\_\_\_ Typed Name/Signature DHO
- A. Advance written notice of charges (copy of incident report) was given to inmate on \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_  
Date Time
- B. The CDC Hearing was held on \_\_\_\_\_ at \_\_\_\_\_  
Date Time
- C. The inmate was advised of his rights before this CDC by \_\_\_\_\_  
on \_\_\_\_\_ and a copy of the advisement of rights form is attached.  
Date

**II. STAFF REPRESENTATIVE**

- A. Inmate waived right to staff representative: (Yes/No/NA)
- B. Inmate requested staff representative and \_\_\_\_\_ appeared.
- C. Requested staff representative declined or could not appear but inmate was advised of option to postpone hearing to obtain another staff representative with the result that \_\_\_\_\_

**III. PRESENTATION OF EVIDENCE**

- A. Inmate has been advised of his right to present a statement or to remain silent, to present documents, including written statements of unavailable witnesses, and for relevant and material witnesses to appear in his behalf at the hearing. Inmate admits/denies the charge(s).
- B. Summary of Inmate Statement: \_\_\_\_\_
- C. Witnesses:  
1. The inmate requested witnesses: (Yes/No/NA)  
2. The following persons were called as witnesses at this hearing and appeared: \_\_\_\_\_  
3. A summary of testimony of each is attached: (Yes/No/NA)  
4. The following persons requested were not called for the reason(s) given: \_\_\_\_\_  
5. Unavailable witnesses were requested to submit written statements and those statements were considered: (Yes/No/NA)
- D. Documentary Evidence: In addition to the Incident Report and Investigation, the Committee considered the following documents: \_\_\_\_\_
- E. Confidential information was considered by the CDC and not provided to inmate (Yes/No/NA)

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**IV. FINDINGS OF THE COMMITTEE**

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- a. The act was committed as charged.
  - b. The following act was committed: \_\_\_\_\_
  - c. No prohibited act was committed: Expunge according to your Statement of Work.
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**V. SPECIFIC EVIDENCE RELIED ON TO SUPPORT FINDINGS**

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**VI. SANCTION RECOMMENDATION**

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**VII. REASON FOR SANCTION RECOMMENDATION**

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**VIII. APPEAL RIGHTS**

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The inmate has been advised of the findings, specific evidence relied on, action and reasons for the action. The inmate has been advised of his right to appeal under the Administrative Remedy Procedure or by letter within 20 days of the imposition of the sanction to the Regional Director. A copy of this report has been given to the inmate.

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**IX. DISCIPLINE COMMITTEE**

Chairperson	Member	Member
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**X. ACTION BY DHO**

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Typed Name/Signature - DHO

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Date

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