## Worker Recommendation Referral

<table>
<thead>
<tr>
<th>Worker</th>
<th>DOC number</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Location</th>
<th>Unit/cell</th>
<th>Priority</th>
</tr>
</thead>
</table>

### QUALIFICATIONS

<table>
<thead>
<tr>
<th>Maximum expiration date</th>
<th>Earned release date</th>
<th>Years remaining</th>
<th>Multidisciplinary team date</th>
</tr>
</thead>
</table>

- **Indeterminate Sentence Review Board, Life Without Parole, or 20+ years to serve?**  
  - Yes  
  - No

- **Currently possess or pursuing a high school diploma or general equivalency degree?**  
  - Yes  
  - No

- **Expressed voluntary interest in consideration for Correctional Industries positions?**  
  - Yes  
  - No

- **Vocational state certificate?**  
  - Yes  
  - No

- **Guilty finding for Category A or drug-related violation in last 12 months?**  
  - Yes  
  - No  
  - If yes, violation number(s): ____ date(s): ____

- **Guilty finding for any other serious violation in last 6 months?**  
  - Yes  
  - No  
  - If yes, violation number(s): ____ date(s): ____

- **Pending disposition(s) for a serious violation?**  
  - Yes  
  - No  
  - If yes, violation number(s): ____ date(s): ____

- **Minimum of 2 years since any escape?**  
  - Yes  
  - No

- **Medical/mental health limitations/concerns?**  
  - Yes  
  - No  
  - Explain: ____________________________________________________________

- **Comments:** ________________________________________________________

### APPROVAL/DENIAL

In addition to the above, a worker may be denied Industrial Area work clearance due to extensive violation history, severity of violations, Intensive Management Unit placements, violent criminal history summary, or other placement reasons.

- □ Approved  □ Denied  
  - Explain: ____________________________________________________________

- **Case Manager**  
  - Signature  
  - Date

- □ Approved  □ Denied  
  - Explain: ____________________________________________________________

- **Correctional Program Manager**  
  - Signature  
  - Date

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The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution:  
- **ORIGINAL** - Assignment Lieutenant/Resource Program Management employees  
- **COPY** - Work Crew Supervisor