

**EXHIBIT O  
ADMINISTRATIVE REVIEW REQUEST FORM**

**BOARD OF PAROLE AND POST-PRISON SUPERVISION  
OREGON ADMINISTRATIVE RULES CHAPTER 255, DIVISION 80**

Name: \_\_\_\_\_ SID# \_\_\_\_\_

Request for Review of BAF #/Order \_\_\_\_\_ dated \_\_\_\_\_

**Requests will be most effective if short and to the point.**

Your request must be made within 45 days of the mailing date on the Board Action Form (BAF) and must meet at least one of the criteria listed below:

1.  There is no substantial evidence to support a finding of: \_\_\_\_\_  
because: \_\_\_\_\_  
\_\_\_\_\_

2.  Pertinent information was available at the time of the original hearing which, through no fault of the [prisoner] inmate/offender, was not considered.

3.  Pertinent information was not available at the time of the original hearing which would have had an effect on the Board action.

Explain what information was or was not available, how it is relevant, and how it would have had an effect on the Board action. Attach documentary evidence, such as court orders.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4.  The Board action is inconsistent with its rules or policies and the inconsistency was not adequately explained in that: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. [ ] The Board action is in violation of statutes and/or constitutions because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. [ ] I have requested review of the same issue(s) on \_\_\_\_\_  
\_\_\_\_\_ dates

7. [ ] I have sought judicial review of the same issue(s) on \_\_\_\_\_  
\_\_\_\_\_ dates

Prepared by \_\_\_\_\_  
(if other than self)

Signed by \_\_\_\_\_ Date \_\_\_\_\_  
(inmate/offender requesting review)

**INMATE/OFFENDER MUST INDICATE WHERE RESPONSE IS TO BE SENT**

Please send response to: \_\_\_\_\_  
(name)  
\_\_\_\_\_  
(address)  
\_\_\_\_\_

Attorney if any: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If no address is indicates, response will be sent to last institution of record or parole officer only.

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because: \_\_\_\_\_  
\_\_\_\_\_

2.  Pertinent information was available at the time of the original hearing which, through no fault of the prisoner, was not considered.

3.  Pertinent information was not available at the time of the original hearing which would have had an effect on the Board action.

Explain what information was or was not available, how it is relevant, and how it would have had an effect on the Board action. Attach documentary evidence, such as court orders.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4.  The Board action is inconsistent with its rules or policies and the inconsistency was not adequately explained in that: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5.  The Board action is in violation of statutes and/or constitutions because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6.  I have requested review of the same issue(s) on \_\_\_\_\_  
\_\_\_\_\_ dates

7.  I have sought judicial review of the same issue(s) on \_\_\_\_\_  
\_\_\_\_\_ dates

Prepared by \_\_\_\_\_  
(if other than self)

Signed by \_\_\_\_\_ Date \_\_\_\_\_  
(inmate requesting review)

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BOARD OF PAROLE AND POST-PRISON SUPERVISION  
OREGON ADMINISTRATIVE RULES CHAPTER 255, DIVISION 80

Name: \_\_\_\_\_ SID# \_\_\_\_\_

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because: \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
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\_\_\_\_\_ dates

7.  I have sought judicial review of the same issue(s) on \_\_\_\_\_  
\_\_\_\_\_ dates

Prepared by \_\_\_\_\_  
(if other than self)

Signed by \_\_\_\_\_ Date \_\_\_\_\_  
(inmate requesting review)

EXHIBIT 0: ADMINISTRATIVE REVIEW REQUEST FORM, 12/06/88  
PURSUANT TO BOARD OF PAROLE RULE: CHAPTER 255, DIVISION 80

You may request an administrative review of the Parole Board action taken in your case (final order). Your request must meet at least one of the criteria listed below:

- (1) the Board action is not supported by the findings, or the written findings are inaccurate; or
- (2) pertinent information was available at the time of the original hearing which, through no fault of the prisoner, was not considered; or
- (3) the action of the Board is inconsistent with its rules or policies or is contrary to law; and
- (4) the matters raised on appeal may have an effect on the original decision.

Requests must be specific, they should explain:

- (1) how the written findings are in error; or
- (2) what information was available, and why it was not considered (i.e., documentation of vacated convictions, resentencing, etc.); or
- (3) how the Board's action was contrary to the guideline rules (matrix system) or law; and
- (4) what the effect may be on the original decision.

Requests will be most effective if short and to the point.

Requests for an administrative review must be made within 45 days after final action by the Board, otherwise you will have waived your right to an administrative review. You may request a waiver of the 45 day deadline if you submit your request after the deadline.

REQUEST: Applicant's name \_\_\_\_\_ Inst.# \_\_\_\_\_  
SID# \_\_\_\_\_ requests administrative review of the Parole  
Board action taken on \_\_\_\_\_ the final decision  
was \_\_\_\_\_

State why your request meets the criteria above \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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BOARD OF PAROLE  
ADMINISTRATIVE REVIEW REQUEST FORM  
PURSUANT TO DIVISION 80

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- (1) the Board action is not supported by the findings, or the written findings are inaccurate; or
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**REQUEST:** Applicant's name \_\_\_\_\_ Inst.# \_\_\_\_\_  
requests administrative review of the Parole Board action taken  
on \_\_\_\_\_ the final decision was \_\_\_\_\_  
State why your request meets the criteria above \_\_\_\_\_

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