## EXHIBIT O ADMINISTRATIVE REVIEW REQUEST FORM

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

Name:		SID#						
Reque	st for Review of BAF #/Order	dated						
Reque	Requests will be most effective if short and to the point.							
	equest must be made within 45 days of the meet at last one of the criteria listed below:	mailing date on the Board Action Form (BAF) and						
1.[]	There is no substantial evidence to support a finding of:							
	because:							
2. []	Pertinent information was available at the t fault of the [prisoner] inmate/offender, was	ime of the original hearing which, through no not considered.						
3. []	Pertinent information was not available at that an effect on the Board action.	he time of the original hearing which would have						
•	n what information was or was not available, ect on the Board action. Attach documentar	, how it is relevant, and how it would have had y evidence, such as court orders.						
4.[]		les or policies and the inconsistency was not						

Exhibit 0 - 06-09-00

Administrative Review Request Form

5.[]	The Board action is in violation of statutes and/or constitutions because:						
6. []	I have requested review of the	e same issue(s) on					
	dates	_•					
7. []		of the same issue(s) on					
	dates	_ <del>'</del>					
Prepar	ed by						
	ed by(if other than :	self)					
Signed	by	Date esting review)					
Please	INMATE/OFFENDER MUsend response to:	UST INDICATE WHERE RESPONSE IS TO BE SENT  (name)					
		(address)					
Attorn	ey if any:						
If no a	ddress is indicates, response v	vill be sent to last institution of record or parole officer only.					
Exhibit	t O – 06-09-00	Administrative Review Request Form					

# **EXHIBIT O: ADMINISTRATIVE REVIEW REQUEST FORM**

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

Name:	SID#
Reque	st for Review of BAF # dated
Reque	Review of BAF # dated  fill be most effective if short and to the point.  It must be made within 45 days of the mailing date on the Board Action Form (BAF) and at last one of the criteria listed below:  The is no substantial evidence to support a finding of:  ause:  The inent information was available at the time of the original hearing which, through no to of the prisoner, was not considered.  The inent information was not available at the time of the original hearing which would have an effect on the Board action.  The information was or was not available, how it is relevant, and how it would have had
Your re	equest must be made within 45 days of the mailing date on the Board Action Form (BAF) and meet at last 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, 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.
	n what information was or was not available, how it is relevant, and how it would have had ect 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 viola	ation of statutes and/or constitutions becau	se:
6. []		the same issue(s) on	
	dates	<del></del> •	•
7. []		w of the same issue(s) on	
•	dates	<u>—</u> ·	
Prepare	ed by		
·	(if other tha		
Signed	by	Date	
	(inmate requesting		

# EXHIBIT O: ADMINISTRATIVE REVIEW REQUEST FORM BOARD OF PAROLE AND POST-PRISON SUPERVISION OREGON ADMINISTRATIVE RULES CHAPTER 255, DIVISION 80

Name:	SID#		
Request fo	or Review of BAF # dated		
Requests v	vill be most effective if short and to the point.		
	est must be made within 45 days of the mailing date on the Board mm (BAF) and must meet at least one of the criteria listed below:		
1. The	ere is no substantial evidence to support a finding of:		
because:		-	
<sub>2</sub> . []	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.		(
how it wou	nat information was or was not available, how it is relevant, and all have had an effect on the Board action. Attach documentary such as court orders.		
		•	
4. 🛘	The Board action is inconsistent with its rules or policies and the inconsistency was not adequately explained in that:	<del></del>	
1/16/91	1 Admin. Review	Request	For

		The Board action is in violation of statutes and/or constitutions because:
6.		I have requested review of the same issue(s) ondates
7.		I have sought judicial review of the same issue(s) on  dates
Pre	epared by	(if other than self)
Sig	gned by .	Date (inmate requesting review)

1/16/91

Admin. Review Request Form

Permanent effective 1/16/91

2

#### EXHIBIT O: 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.

REQUES	<u> </u>	4ppl:	icant'	s na	me				_ Inst.:	#		
SID#_	act	ion	taken	00	re	quests the	admini final	strative decision	review	of	the	Parole
State	why	λοπι	requ	est	meets	the c	riteria	above_				<u> </u>
						<del>-</del>				_		_
				-								
<del></del>							, <u>,</u>					
									<del></del>	·	<del></del> _	_
			<del></del>				<del></del>	<del></del>				<del></del>
									<u> </u>	_		
												<del></del>
				·- <u></u> -					<del></del>			—

# EXHIBIT O BOARD OF PAROLE ADMINISTRATIVE REVIEW REQUEST FORM PURSUANT TO 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.#
requests administrative review of the A	Parole Board action taken
on the final decision was	
State why your request meets the crite	ria above