AUTHORITY:

A. NMSA 1978, Section 31-21-6, as amended.
B. NMSA 1978, Section 31-21-7 (F), as amended.

REFERENCE:


PURPOSE:

To provide offender background information to the New Mexico Corrections Department's (NMCD) institutions to assist in classification, evaluation, and institutional programming.

[4-APPFS-1B-09]

APPLICABILITY:

All Probation and Parole Division (PPD) staff, volunteers and interns.

FORMS:

Case Material Packet form (CD-051401.1) (1 page)

DEFINITIONS:

A. Case Materials: The necessary information or documents needed to classify and evaluate an offender. These shall include Pre-Sentence Reports (PSR), if available, police reports, PPD Violation Reports, court documents, and any other relevant documents that are available to PPD staff.
B. PSR: Pre-Sentence Report.

POLICY:

The PPD will provide offender case materials to the Department's institutions in a timely manner to assist in classification, evaluation, and institutional programming.

David Jablonski, Secretary of Corrections
New Mexico Corrections Department
AUTHORITY:

Policy CD-051400

PROCEDURES: [4-APPFS-1B-09]

A. If the Probation and Parole Division prepared a PSR on an offender who is subsequently committed to the custody of the NMCD, or if a probationer supervised by the PPD has his or her probation revoked and subsequently committed to the custody of the NMCD, the PPD District Office shall forward a copy of all case materials with a cover memorandum within the designated timelines as set out below:

1. Diagnostic & Evaluation inmates: five (5) business days.

2. All other inmates: fourteen (14) business days.

Director of Classification
Reception and Diagnostic Center
Los Lunas Correctional Facility
P. O. Drawer 1328
Los Lunas, New Mexico 87031-1328

Or, if the person sentenced is a female, forward to:

Classification
Corrections Corporation of America
New Mexico Women's Correctional Facility
1700 East Old Highway 66
P. O. Box 800
Grants, New Mexico 87020
(505) 287-2941

B. If an offender is committed to the custody of the NMCD and notification has not been provided to the PPD, the Classification Supervisor or Unit Manager of the Reception Diagnostic Center will advise the appropriate PPD District Office and request the case materials be forwarded. The case materials shall be forwarded in accordance with the established time frame above.

The PPD District Office will request all relevant case materials from the appropriate agencies and/or courts within five (5) working days, and will forward the case materials upon receipt.
David Jablonski, Secretary of Corrections  
New Mexico Corrections Department  
07/31/18  
Date
CASE MATERIAL PACKET

PO: ____________
Unit: ____________ Date: _____

To: ______________________

RE: ____________________________ Case #: ______________

The above referenced inmate has been committed to the Corrections Department. Enclosed herewith, Please find the following to the above referenced inmate, for your information:

☐ Pre-Sentence Report  
☐ Supplemental Report  
☐ Judgment and Sentence  
☐ Plea & Disposition, GJI  
☐ Commitment to the Corrections Department  
☐ Commitment for a 60 Day Diagnostic Evaluation  
☐ Probation/Parole Violation Report  
☐ Police/Offense Report/Criminal Complaint  
☐ Other: ___________________________________________________________________

☐ Offender has probation to follow case and the origination district office will need to be notified when the offender is paroled or finalizes his or her number.

Send complete packet to ____________________ - ____________________ - ____________________

Name District Region

Should you have any questions, please advise _____________________________________________________________________________

Contact Telephone Number

*****************************************ATTENTION INSTITUTIONS*****************************************

PLEASE ACKNOWLEDGE RECEIPT OF THIS CASE MATERIAL. FILL OUT SECTION AND FAX A COPY OF THIS SHEET ATTENTION: To Name: __________________________

Fax #: __________________________

Name of person acknowledging receipt of fax: __________________________ Title: ______________

Date: ______________ Time: ______________