

**COUNTY PROBATION DEPARTMENT
QUARTERLY HIGH RISK SEX OFFENDER on CONTINUOUS ELECTRONIC MONITORED
PROBATION: DATA REPORT to the CORRECTIONAL STANDARD AUTHORITY (CSA)**

Only report information to CSA per Penal Code section 1202.8 for those people in your county who:

1. Are on probation supervision
2. Scored high risk on a SARATSO instrument. Currently the instruments are the Static 99 with a score of 6 or above and the JSORATT-II with a score of ?? or above (message into Deputy AG assigned to SARATSO to clarify confusing info).
3. Are on Continuous Electronic Monitoring (CEM)

Person reporting: _____ Phone: _____ Email: _____

Time period of report: ___mm/dd/yy to mm/dd/yy___ Opens a drop-down pick list of calendar quarters. When all data entry for a time period is finished, CSA will remove those dates.

County: ___drop down list of counties___ Other Geo area? _____

Please complete the following for each new high risk sex offender who is starting continuous electronic monitoring on probation or to revise or update any information for a high risk sex offender that was previously submitted to CSA:

Last Name: _____ First Name: _____ MI _____

DOB: ___mm/dd/yy___ CII Number: _____ Gender: M F

Is this a new high risk sex offender on Continuous Electronic Monitoring: (pick one)

Yes – first time this offender is being reported to CSA (this page continues)

No – offender previously reported to CSA, now reporting new arrest or conviction/adjudication or end of probation supervision (goes to next page)

Other – need to revise offender’s previous information (opens data correction page)

**CONTINUED REPORT of NEW HIGH RISK SEX OFFENDER on CONTINUOUS
ELECTRONIC MONITORED PROBATION**

Age at Conviction or Adjudication on SO: _____ Ethnicity/Race: pick list

Date of Conviction or Adjudication: ___mm/dd/yy___ Sex Offender Statute: pick list

SARATSO Tool: pick list SARATSO Score: _____ we’ll develop a pick list

Date Continuous Electronic Monitoring during Probation started: ___mm/dd/yy___

If you have new arrest or conviction/adjudication information to report on this sex offender you will need to now go back to the entry page, re-enter the offender’s name, DOB, CII number and gender. Then select “no” in answer to whether the offender is being newly reported to CSA – that will take you to the page to enter new offense information.

**REPORT of NEW ARREST
or CONVICTION/ADJUDICATION FOR PREVIOUSLY REPORTED HIGH RISK SEX
OFFENDER on CONTINUOUS ELECTRONIC MONITORING
or END OF PROBATION SUPERVISION**

Please complete the following information on the high risk sex offender on continuous electronic monitoring who has previously been reported to CSA:

ARRESTS:

New Sex Offense ARREST
since original conviction or last report
Date: ___mm/dd/yy___
Statute: pick list

New NON Sex Offense ARREST
since original conviction or last report
Date: ___mm/dd/yy___
Statute:

CONVICTIONS or ADJUDICATIONS:

New Sex Offense CONVICTION/ADJUDICATION
since original conviction or last report
Date: ___mm/dd/yy___
Statute: pick list

**New NON Sex Offense CONVICTION/
ADJUDICATION**
since original conviction or last report
Date: ___mm/dd/yy___
Statute:

Date Continuous Electronic Monitoring or Probation ended: ___mm/dd/yy___

**REPORT of DATA CORRECTION FOR PREVIOUSLY REPORTED HIGH RISK SEX
OFFENDER on CONTINUOUS ELECTRONIC MONITORING**

*Please enter the incorrect data that was previously reported in the first box and enter the corrected data in the second box. Please be sure to includes dates if needed.
Thank you!*

Previously submitted incorrect data: _____
Open text box for typing in wrong information

Replace with correct data: _____
Open text box for typing in correct information

**COUNTY PROBATION DEPARTMENT
QUARTERLY HIGH RISK SEX OFFENDER CONTINUOUS ELECTRONIC MONITORING
EQUIPMENT COST REPORT**

County:__Drop down pick list__ **Time Period covered:**__dd/mm/yy to dd/mm/yy__drop
down pick list of quarterly time periods, updated as counties complete data entry

Cost to County during period:_____dollars

***Cost includes personnel expense, equipment expense, contract management expense –
any gross amount of expense paid by the county for the Continuous Electronic
Monitoring of High Risk Sex Offenders on Probation.***

**Check one: Purchase [] Lease [] Contracted []
Other [] Explain:_____**

**Reimbursement received from sex offenders or other sources for cost of CEM during
period: _____dollars**

***Please note that a county that contracts out its CEM program to an organization that
directly receives payment from offenders for the offender's monitoring will only report
the gross amount for the County to manage the CEM contract.***