



# REQUEST FROM THE FIELD

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*Probation Violation Guidelines*

# SENTENCING REVOCATION REPORT

IDENTIFY THE STATUTE CITATION FOR EACH STATE CONDITION OF PROBATION

1. Objective is to record the probation condition(s) violated in the court order
2. Recording the specific violation(s) will make it easier to apply the requirements of § 19.2-306.1 and Heart v. Commonwealth in future hearings
3. Printing the specific statute citation along with the Dept. of Corrections probation condition number and description will assist the clerk in preparing the court order

**Comparison of the Department of Corrections (DOC) Conditions of Probation to the Conduct Defined by § 19.2-306.1**

DOC Condition Number	DOC Description*	Statute #	Description in § 19.2-306.1	Gang*	Sex Offender*
1	I will obey all Federal, State and local laws and ordinances.				
2	I will report any arrest, including traffic tickets, within 3 days to the Probation and Parole Officer.	i	Failure to report any arrest, including traffic tickets, within three days to the probation officer		
3	I will maintain regular employment and I will notify the Probation and Parole Officer promptly of any changes in my employment.	ii	Failure to maintain regular employment or notify the probation officer of any changes in employment;		
4	I will report in person or by telephone to the Probation and Parole office listed below within three working days of my release from incarceration, and as otherwise instructed thereafter.	iii	Failure to report within three days of release from incarceration;		
5	I will permit the Probation and Parole Officer to visit my home and place of employment.	iv	Failure to permit the probation officer to visit his home and place of employment;	7	
6	I will follow the Probation and Parole Officer's instructions and will be truthful, cooperative, and report as instructed.	v	Failure to follow the instructions of the probation officer, be truthful and cooperative, and report as instructed;		
7	I will not use alcoholic beverages to the extent that it disrupts or interferes with my employment or orderly conduct.	vi	Failure to refrain from the use of alcoholic beverages to the extent that it disrupts or interferes with his employment or orderly conduct;		3
8	I will not unlawfully use, possess or distribute controlled substances or related paraphernalia.	vii	Failure to refrain from the use, possession, or distribution of controlled substances or related paraphernalia;		3
9	I will not use, own, possess, transport or carry a firearm.	viii	Failure to refrain from the use, ownership, possession, or transportation of a firearm;	6	
10	I will not change my residence without the permission of the Probation and Parole Officer. I will not leave the State of Virginia or travel outside of a designated area without permission of the Probation and Parole Officer.	ix	Failure to gain permission to change his residence or remain in the Commonwealth or other designated area without permission of the probation officer;		1
11	I will not abscond from supervision. I understand I will be considered an absconder when my whereabouts are no longer known to my supervising officer. I freely, voluntarily and intelligently waive any right I may have to extradition if arrested outside of Virginia.	x	Failure to maintain contact with the probation officer whereby his whereabouts are no longer known to the probation officer.		

\*Please see the DOC Conditions of Probation, Gang Conditions and Sex Offender Conditions in the Appendix Section of this manual. The number in the table under Gang and Sex Offender corresponds to the condition/instructions number defined by the DOC that is similar to conduct specifically defined by § 19.2-306.1 as technical.

**Sentencing Revocation Report (SRR) -****Felony Supervision/Good Behavior/Suspended Sentence Violations**

Scheduled Sentencing Date: 07/01/25

## ◆ OFFENDER

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: EXAMPLE Suffix: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ SID/CCRE: \_\_\_\_\_ CORIS Offender ID: \_\_\_\_\_

## ◆ COURT

Judicial Circuit: \_\_\_\_\_ City/County: \_\_\_\_\_ Docket Number: \_\_\_\_\_ FIPS Code: \_\_\_\_\_

Sentencing Judge's Name: \_\_\_\_\_

Preparer Name: \_\_\_\_\_ ☐ Commonwealth's Attorney ☐ Probation Officer

◆ Most Serious Original Primary Offense: \_\_\_\_\_ Sentencing Date: \_\_\_\_\_

## ◆ PRIOR REVOCATIONS FOR ALL UNDERLYING OFFENSES (For Current Revocation Event)

Enter Date and DOC Number for Condition(s) Violated:

Date: \_\_\_\_\_ Special Conditions: \_\_\_\_\_

## ◆ TYPE OF REVOCATION

(Complete SRR and Guidelines): ☐ State Supervised Probation for Felony(Complete SRR only, guidelines do not apply): ☐ Local Probation ☐ Good Behavior /Suspend Sentence☐ CCAP ☐ Procedural ☐ Post Release

Conditions Violated as Cited by Probation and Parole \_\_\_\_\_ Worksheet to Be Completed \_\_\_\_\_

Technical Violation (2-11): ☐ 1st ☐ 2nd ☐ 3rd or sub ☐ No New ConvictionsTechnical Violation (9 or 11): ☐ 1st ☐ 2nd ☐ 3rd or sub ☐ No New ConvictionsSpecial Conditions: ☐ YesNew Law Violation: ☐ Felony ☐ New Law Felony☐ Misdemeanor ☐ New Law Misdemeanor or Lesser Offense Conviction

(NOTE: Guidelines are not completed for First Offender, Deferred Finding, Post Release or Parole Violations)

## ◆ DOC CONDITIONS CITED IN VIOLATION BY PROBATION/PAROLE OFFICER (check all that apply)

- |                                                                                             |                                                                                         |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> 1. Fail to obey all Federal, State, and local laws.                | <input type="checkbox"/> 9. Use, own, possess, transport or carry firearm               |
| <input type="checkbox"/> 2. Fail to report any arrests within 3 days to PO.                 | <input type="checkbox"/> 10. Change residence or leave Virginia without permission      |
| <input type="checkbox"/> 3. Fail to maintain employment or to report changes.               | <input type="checkbox"/> 11. Abscond from supervision                                   |
| <input type="checkbox"/> 4. Fail to report as instructed                                    | <input type="checkbox"/> Fail to follow special conditions/instructions (specify) _____ |
| <input type="checkbox"/> 5. Fail to allow probation officer to visit home or job.           |                                                                                         |
| <input type="checkbox"/> 6. Fail to follow instructions, be truthful, and cooperative.      | <input type="checkbox"/> Special Sex Offender Conditions/Instructions                   |
| <input type="checkbox"/> 7. Use alcoholic beverages                                         | (Enter Letter for Condition(s) Violated): _____                                         |
| <input type="checkbox"/> 8. Use, possess, distribute controlled substances or paraphernalia | <input type="checkbox"/> Special Gang Member Conditions/Instructions                    |
|                                                                                             | (Enter Letter for Condition(s) Violated): _____                                         |

## ◆ FOR JUDICIAL REVIEW

TREATMENT, SANCTIONS, EDUCATIONAL PROGRAMS &amp; ALTERNATIVES AVAILABLE

◆ DATE ARRESTED FOR THIS VIOLATION OR SHOW CAUSE ISSUED/SERVED: \_\_\_\_\_

◆ PRETRIAL CONFINEMENT FOR THIS VIOLATION (There is no indication that the time served will be applied to this case)

☐ No ☐ Confined Since Arrest for Violation

Dates Confined: \_\_\_\_\_ to \_\_\_\_\_

☐ Both incarcerated and at Liberty Pretrial

\_\_\_\_\_ to \_\_\_\_\_

## ◆ PRETRIAL STATUS RELEASE

☐ Bond: ☐ Secured ☐ Unsecured ☐ Own Recognizance ☐ Third Party Release ☐ N/A◆ RECOMMENDATION RANGE: ☐ Time Served: \_\_\_\_\_ to \_\_\_\_\_Statutory Requirement if Applicable ☐ No time ☐ 0 -14 days**Sentencing Revocation Report (SRR) -****Felony Supervision/Good Behavior/Suspended Sentence Violations**

## ◆ OFFENDER

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ SID/CCRE: \_\_\_\_\_ CORIS Offender ID: \_\_\_\_\_

## ◆ COURT

Judicial Circuit: \_\_\_\_\_ City/County: \_\_\_\_\_ Docket Number: \_\_\_\_\_ FIPS Code: \_\_\_\_\_

Sentencing Judge's Name: \_\_\_\_\_

Preparer Name: \_\_\_\_\_ ☐ Commonwealth's Attorney ☐ Probation Officer

Most Serious Original Primary Offense: \_\_\_\_\_ Sentencing Date (Original): \_\_\_\_\_

## PRIOR REVOCATIONS FOR ALL UNDERLYING OFFENSES (For Current Revocation Event)

Enter Date and DOC Number for Condition(s) Violated:

Date: \_\_\_\_\_ Specify Special Conditions: \_\_\_\_\_

## ◆ TYPE OF REVOCATION

(Complete SRR and Guidelines): ☐ State Supervised Probation for Felony(Complete SRR only, Guidelines do not apply): ☐ Local Probation/ Misdemeanors ☐ Good Behavior /Suspend Sentence☐ CCAP ☐ Procedural ☐ Post Release

Conditions Violated as Cited by Probation and Parole \_\_\_\_\_ Worksheet to Be Completed \_\_\_\_\_

Technical Violation (2-11): ☐ 1st ☐ 2nd ☐ 3rd or sub ☐ No New ConvictionsTechnical Violation (9 or 11): ☐ 1st ☐ 2nd ☐ 3rd or sub ☐ No New ConvictionsSpecial Conditions: ☐ YesNew Law Violation: ☐ Felony ☐ New Law Felony☐ Misdemeanor ☐ New Law Misdemeanor or Lesser Offense Conviction

(NOTE: Guidelines are not completed for First Offender, Deferred Finding, Post Release or Parole Violations)

## ◆ DOC CONDITIONS CITED IN VIOLATION BY PROBATION/PAROLE OFFICER (check all that apply)

- |                                                                                                                 |                                                                                                |
|-----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> 1. Fail to obey all Federal, State, or local laws.                                     | <input type="checkbox"/> 9. Use, own, possess, carry firearm §19.2-306.1A(viii)                |
| <input type="checkbox"/> 2. Fail to report arrests w/n 3 days to PO §19.2-306.1A(i)                             | <input type="checkbox"/> 10. Change residence or leave Virginia §19.2-306.1A (ix)              |
| <input type="checkbox"/> 3. Fail to maintain employment/report §19.2-306.1A(ii)                                 | <input type="checkbox"/> 11. Abscond from supervision §19.2-306.1A (x)                         |
| <input type="checkbox"/> 4. Fail to report as instructed §19.2-306.1A(iii)                                      | <input type="checkbox"/> Fail to follow special conditions of the Court or DOC (specify) _____ |
| <input type="checkbox"/> 5. Fail to allow PO to visit home or job. §19.2-306.1A(iv)                             |                                                                                                |
| <input type="checkbox"/> 6. Fail to follow instructions/cooperative §19.2-306.1A(v)                             | <input type="checkbox"/> Sex Offender DOC Conditions Violated: _____                           |
| <input type="checkbox"/> 7. Use alcoholic beverages §19.2-306.1A(vi)                                            | <input type="checkbox"/> Gang Member DOC Conditions Violated: _____                            |
| <input type="checkbox"/> 8. Use, possess, distribute controlled substances or paraphernalia §19.2-306.1 A (vii) |                                                                                                |

## ◆ FOR JUDICIAL REVIEW

TREATMENT, SANCTIONS, EDUCATIONAL PROGRAMS &amp; ALTERNATIVES AVAILABLE

DATE ARRESTED FOR THIS VIOLATION OR SHOW CAUSE ISSUED/SERVED: \_\_\_\_\_

PRETRIAL CONFINEMENT FOR THIS VIOLATION (There is no indication that the time served will be applied to this case)

☐ No ☐ Confined Since Arrest for Violation☐ Both incarcerated and at Liberty Pretrial Dates Confined \_\_\_\_\_ to \_\_\_\_\_ and \_\_\_\_\_ to \_\_\_\_\_

## PRETRIAL STATUS RELEASE :

☐ Bond: ☐ Secured ☐ Unsecured ☐ Own Recognizance ☐ Third Party Release ☐ N/A◆ RECOMMENDATION RANGE: ☐ Time Served: \_\_\_\_\_ to \_\_\_\_\_Statutory Requirement if Applicable ☐ No time ☐ 0 -14 days



# Virginia Criminal Sentencing Commission

100 North 9<sup>th</sup> Street  
Richmond, VA 23219

804.225.4398 (P)  
804.393.9588 (T)

[www.vcsc.virginia.gov](http://www.vcsc.virginia.gov)

[mobile.vcsc.virginia.gov](http://mobile.vcsc.virginia.gov)  
Text VCSC to 804.656.5111



***SWIFT***@vcsc.virginia.gov

