



Sentencing Guidelines Cover Sheet

Scheduled Sentencing Date:

____/____/____

Complete this form ONLY for applicable felonies sentenced on or after July 1, 2018.

◆ OFFENDER

First _____ Middle _____ Last _____ Suffix _____

Date of Birth: _____
Month Day Year

Social Security Number: _____

CCRE: V A _____

CORIS Offender ID: _____ PSI: _____

◆ COURT

Judicial Circuit _____ City/County _____ FIPS Code: _____

Sentencing Judge's Name _____ For Office Use Only

Preparer Name _____ Commonwealth's Attorney Probation Officer

Prosecuting Commonwealth's Attorney _____ Defense Attorney _____

◆ CONVICTIONS

Offense	Counts	VCC	Offense Date
Primary Offense			<small>Month Day Year</small>
_____	____	____-____-____	____/____/____
Additional Offenses			
_____	____	____-____-____	____/____/____
_____	____	____-____-____	____/____/____

Primary Offense Code Section § _____ Docket Number _____

Drug Type in Event *Please check all that apply. This information is for research purposes only.*

- Cocaine Codeine Fentanyl Heroin Hydrocodone Methadone
 Methamphetamine Methylphenidate Morphine Oxycodone Any other Schedule I/II drug _____

◆ METHOD OF ADJUDICATION

- Jury Trial Sentence Set by Jury: _____
Years Months Days Life Juvenile Fine Only
 Bench Trial Guilty Plea Alford Plea/Nolo contendere

◆ SENTENCING GUIDELINES RECOMMENDATION

Section B

Probation/No Incarceration
 Incarceration 1 Day to 3 Months
 Incarceration 1 Day to 6 Months
 Incarceration 3 to 6 Months
 Probation/No Incarceration or Incarceration to 6 Months

Section C

Life Sentence Non Guidelines Offense
 Incarceration (*Enter Midpoint and Range Below*)
(Primary offense is a non guidelines offense)

Range Midpoint: _____
Years Months Days

Sentence Range: _____ TO _____
Years Months Days

Recommendation Adjusted for Mandatory Minimum

◆ NONVIOLENT RISK ASSESSMENT Section D of Drug, Fraud, and Larceny Worksheets

- Recommended for Alternative Punishment Not Applicable (INELIGIBILITY CONDITIONS marked on Section D)
 NOT Recommended for Alternative Punishment Not a DRUG, FRAUD or LARCENY Offense

◆ Final Disposition Fill In After Sentence Has Been Pronounced

◆ SENTENCE

Total Time Imposed Before Suspension Life Sentence +

Years		
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Months		
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Days		
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Total Effective Time to Serve Life Sentence +

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 Sentenced to Time Served

Post Release

Post Release Term § 18.2-10

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Post Release Supervision Period § 19.2-295.2(A)

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Probation Period (Supervised) § 19.2-303 Indefinite

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Good Behavior Period (§ 19.2-306) _____
Years Months Days

Check all that apply

- Incarceration Sentence to Run Concurrently With Another Sentencing Event
- Written Plea Agreement Accepted = Rule 3A:8(c)(1) (A) or (C)
- Plea and Recommendation Accepted = Rule 3A:8(c)(1)(B)
- Oral Sentence Recommendation Accepted
- Restitution \$ _____ Fine \$ _____

Other Sentencing Programs (check all that apply)

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Day Reporting <input type="checkbox"/> Detention Center Incarceration <input type="checkbox"/> Diversion Center Incarceration <input type="checkbox"/> Electronic Monitoring <input type="checkbox"/> Intensive Probation <input type="checkbox"/> § 18.2-251/§ 18.2-258.1 <input type="checkbox"/> Substance Abuse Treatment | <ul style="list-style-type: none"> <input type="checkbox"/> Community-Based Program _____ <input type="checkbox"/> CCAP Detention/Diversion Center Incarceration, 22-28 weeks <input type="checkbox"/> CCAP Detention/Diversion Center Incarceration, 42-48 weeks <input type="checkbox"/> Drug Court <input type="checkbox"/> Youthful Offender <input type="checkbox"/> DJJ Commitment <input type="checkbox"/> Indeterminate <input type="checkbox"/> Determinate <input type="checkbox"/> Other _____ |
|--|---|

Office Use Only

Other	CBP
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◆ REASON FOR DEPARTURE AND/OR MODIFICATION OF JURY SENTENCE

Must be completed pursuant to § 19.2-298.01(B) and/or § 19.2-295(B)/ § 19.2-303

	Office Use Only	
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◆ SENTENCING DATE

Month	

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Day	

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Year		

Judge's Signature

◆ ATTACH COURT ORDER AND MAIL Pursuant to § 19.2-298.01(E)

After sentencing, send to:

Virginia Criminal Sentencing Commission • 100 North Ninth Street • Fifth Floor • Richmond, Virginia 23219

Drug/Other Section A

Offender Name: _____

◆ Primary Offense

A. Other than listed below (1 count)	1
B. Sell, etc. 1/2 ounce - 5 pounds of marijuana for profit; Sell, etc. marijuana to inmate for accommodation	
1 count	3
2 counts	8
C. Sell, etc. more than 5 pounds of marijuana for profit; Sell, etc. third or subsequent felony (1 count)	12
D. Sell, etc. marijuana to minor (1 count)	11
E. Manufacture marijuana not for personal use (1 count)	8
F. Transport 5 pounds or more of marijuana into Commonwealth (1 count)	12
G. Sell, etc. Schedule III or IV drug to minor (1 count)	11
H. Sell, etc. Schedule III drug-not anabolic steroid	
1 count	8
2 counts	10
I. Sell, etc. Schedule IV drug	
1 count	6
2 counts	8

Score

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◆ Primary Offense Remaining Counts Total the maximum penalties for counts of the primary not scored above

Years: 5 - 10	0
11 - 21	2
22 - 30	3
31 - 42	4
43 or more	5

0	
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◆ Additional Offenses Total the maximum penalties for additional offenses, including counts

Years: Less than 4	0
4 - 10	1
11 - 21	2
22 - 30	3
31 - 42	4
43 or more	5

0	
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◆ Knife or Firearm in Possession at Time of Offense ————— If YES, add 2

0	
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◆ Conviction in Current Event Requiring Mandatory Minimum Term (6 mos or more) ————— If YES, add 9

0	
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◆ Prior Convictions/Adjudications Total the maximum penalties for the 5 most recent and serious prior record events

Years: Less than 7	0
7 - 26	1
27 - 48	2
49 or more	3

0	
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◆ Prior Incarcerations/Commitments ————— If YES, add 2

0	
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◆ Prior Felony Drug Convictions/Adjudications

Number of Counts: 1 - 2	1
3 - 4	2
5	3
6 or more	4

0	
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◆ Prior Juvenile Record ————— If YES, add 1

0	
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◆ Legally Restrained at Time of Offense

None	0
Other than parole/post-release, supervised probation or CCCA	1
Parole/post-release, supervised probation or CCCA	4

0	
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Total Score

————— If total is 10 or less, go to **Section B**. If total is 11 or more, go to **Section C**.

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Drug/Other Section B

Offender Name: _____

◆ Primary Offense

A. Other than listed below (1 count)	1
B. Sell, etc. 1/2 ounce - 5 pounds of marijuana for profit; Sell, etc. marijuana to inmate for accommodation	
1 count	6
2 counts.....	9
C. Manufacture marijuana not for personal use (1 count).....	5
D. Sell, etc. Schedule III drug - not anabolic steroid	
1 count	7
2 counts.....	12
E. Sell, etc. Schedule IV drug	
1 count	6
2 counts.....	9

Score

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◆ Primary Offense Remaining Counts Total the maximum penalties for counts of the primary not scored above

Years: Less than 10.....	0
10 - 19	2
20 - 28	3
29 - 38	4
39 or more.....	5

0	
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◆ Additional Offenses Total the maximum penalties for additional offenses, including counts

Years: Less than 1.....	0
1 - 9	2
10 - 19.....	3
20 - 28	4
29 - 38	5
39 or more.....	6

0	
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◆ Knife or Firearm in Possession at Time of Offense _____ If YES, add 2

0	
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◆ Prior Convictions/Adjudications Total the maximum penalties for the 5 most recent and serious prior record events

Years: Less than 1.....	0
1 - 22	1
23 - 43	2
44 or more.....	3

0	
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◆ Prior Misdemeanor Convictions/Adjudications

Number of Counts: 1 - 4	1
5 - 9	2
10 or more	3

0	
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◆ Prior Incarcerations/Commitments

Primary offense: D: Sale, etc. of a Schedule III drug - not anabolic steroid or E: Schedule IV drug
If YES, add 4

Primary offense: _____
All other offenses
If YES, add 1

0	
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◆ Prior Juvenile Record _____ If YES, add 1

0	
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◆ Legally Restrained at Time of Offense

Primary offense: D: Sale, etc. of a Schedule III drug - not anabolic steroid or E: Schedule IV drug	
None	Points 0
Other than parole/post-release, supervised probation or CCCA	3
Parole, post-release, supervised probation or CCCA	4

Primary offense: _____	
All other offenses	
None	Points 0
Other than parole/post-release, supervised probation or CCCA	2
Parole, post-release, supervised probation or CCCA	3

0	
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Total Score

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See Drug/Other Section B Recommendation Table to convert score to guidelines sentence. Then, go to Section D Nonviolent Risk Assessment and follow the instructions.

Drug/Other ❖ Section C

Offender Name: _____

Category I
 Category II
 Other

Primary Offense	32	16	8
A. Other than listed below: (1 count)			
B. Sell, etc. 1/2 oz - 5 pounds of marijuana for profit; Sell, etc. marijuana to inmate for accommodation			
Attempted, conspired or completed: 1 count	20	10	5
2 counts	28	14	7
3 counts	40	20	10
C. Sell, etc. more than 5 pounds of marijuana for profit; Sell etc. third or subsequent felony			
Attempted, conspired or completed: 1 count	76	38	19
D. Sell marijuana to minor			
Attempted, conspired or completed: 1 count	60	30	15
E. Manufacture marijuana not for personal use			
Attempted, conspired or completed: 1 count	24	12	6
F. Transport 5 pounds or more of marijuana into Commonwealth			
Attempted, conspired or completed: 1 count	76	38	19
G. Sell, etc. Schedule III or IV drug to minor			
Attempted, conspired or completed: 1 count	60	30	15
H. Sell, etc. Schedule III drug - not anabolic steroid			
Attempted, conspired or completed: 1 count	20	10	5
2 counts	32	16	8
H. Sell, etc. Schedule IV drug			
Attempted, conspired or completed: 1 count	8	4	2

Score

▼

0		
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Primary Offense Remaining Counts Assign points to each count of the primary not scored above and total the points

Maximum Penalty:	Less than 5	1
(years)	30	4
	40 or more	5

▼

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Additional Offenses Assign points to each additional offense (including counts) and total the points

Maximum Penalty:	Less than 5	0
(years)	5, 10	1
	20	2
	30	4
	40 or more	5

▼

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Mandatory Minimum for Weapon Conviction(s) in Current Event Assign points to each additional offense with a mandatory minimum and total the points

2 Year Mandatory Minimum	13
3 Year Mandatory Minimum	25
5 Year Mandatory Minimum	32

▼

0		
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Firearm in Possession at Time of Offense _____ **If YES, add 5** →

▼

0	0	
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Prior Convictions/Adjudications Assign points to the 5 most recent and serious prior record events and total the points

Maximum Penalty:	Less than 5	0
(years)	5, 10	1
	20	2
	30	3
	40 or more	4

▼

0		
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Prior Felony Drug Convictions/Adjudications _____

Number of Counts:	1	2
	2	3
	3	5
	4	7
	5	8
	6 or more	10

▼

0		
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Prior Felony Convictions/Adjudications Against Person _____

Number of Counts:	1	3
	2	6
	3	9
	4 or more	12

▼

0		
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Prior Felony Property Convictions/Adjudications _____

Number of Counts:	1, 2	1
	3	2
	4 or more	3

▼

0	0	
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Prior Juvenile Record _____ **If YES, add 1** →

▼

0	0	
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Legally Restrained at Time of Offense _____ **If YES, add 3** →

▼

0	0	
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Total Score _____ →

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See **Drug/Other Section C Recommendation Table** for guidelines sentence range. Then, go to **Section D Nonviolent Risk Assessment** and follow the instructions.

Nonviolent Risk Assessment Drug/Other Section D

Offender Name: _____

◆ Ineligibility Conditions

- A. Was the offender recommended for **Probation/No Incarceration** on Section B? Yes No
- B. Do any of the offenses at sentencing involve the sale, distribution, or possession with intent, etc. of cocaine of a combined quantity of 28.35 grams (1 ounce) or more? Yes No
- C. Are any prior record offenses violent (Category I/II listed in Appendix A of the Guidelines Manual)? Yes No
- D. Are any of the offenses at sentencing violent (Category I/II listed in Appendix A of the Guidelines Manual)? Yes No
- E. Do any of the offenses at sentencing require a mandatory term of incarceration? Yes No

If answered YES to ANY, go to "Nonviolent Risk Assessment Recommendations" on cover sheet and check Not Applicable. If answered NO to ALL, complete remainder of Section D worksheet.

◆ Offender Age at Time of Offense _____

- Younger than 21 years 9
 - 21 to 29 years 6
 - 30 to 43 years 3
 - Over 43 years 1
- | | |
|--|--|
| | |
|--|--|

◆ Gender _____

- Offender is Male 2
- | | |
|---|--|
| 0 | |
|---|--|

◆ Prior Juvenile Adjudication _____

- Female with prior juvenile adjudication 1
 - Male with prior juvenile adjudication 7
 - Juvenile record unknown
- | | |
|---|--|
| 0 | |
|---|--|

◆ Prior Adult Felony Convictions _____

- Number: 0 0
 - 1 - 2 1
 - 3 5
 - 4 or more 15
- | | |
|--|--|
| | |
|--|--|

◆ Prior Adult Incarcerations _____

- Number: 0 0
 - 1 - 3 1
 - 4 or more 8
- | | |
|---|--|
| 0 | |
|---|--|

◆ Prior Arrest or Confinement Within Past 12 Months (Prior to Offense) — If YES, add 3 —>

0	
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Total Score _____

- 15 or less, check Recommended for Alternative Punishment.
- 16 or more, check NOT Recommended for Alternative Punishment.

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Drug/Other/Section D

Go to **Cover Sheet** and fill out **Nonviolent Risk Assessment Recommendations**.



Additional Offenses Continuation Sheet

Offender Name: _____

Offense	Counts	VCC	Offense Date		
			Month	Day	Year
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
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