

Sentencing Guidelines Cover Sheet

Complete this form ONLY for applicable felonies sentenced on or after July 1, 2007.

◆ OFFENDER

First: _____ Middle: _____

Last: _____ Suffix: _____

Date of Birth: _____ / _____ / _____ Social Security Number: _____ - _____ - _____
Month Day Year

CCRE: V A _____ PSI Number: _____
For Use by Probation Officer

◆ COURT

Judicial Circuit : _____ City/County: _____ FIPS Code: _____

Judge's Name: _____ Office Use Only

Preparer Name: _____ Preparer Title: Commonwealth's Attorney Probation Officer

Prosecuting Commonwealth's Attorney: _____ Defense Attorney: _____

◆ CONVICTIONS

Offense	Counts	VCC	Offense Date
Primary Offense:			Month Day Year
_____	<input type="text"/>	_____ - _____ - _____	____ / ____ / ____
Additional Offenses:			
_____	<input type="text"/>	_____ - _____ - _____	____ / ____ / ____
_____	<input type="text"/>	_____ - _____ - _____	____ / ____ / ____

Primary Offense Code Section : § _____ Docket Number: _____

◆ METHOD OF ADJUDICATION

Jury Trial → Sentence Set by Jury: Life Sentence Years Months Days
Enter Sentence

Bench Trial Guilty Plea Alford Plea/Nolo contendere

◆ SENTENCING GUIDELINES RECOMMENDATIONS

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

Mandatory Minimum _____

Section C

- Life Sentence
- Incarceration (Enter Midpoint and Range Below)

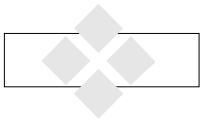
Range Midpoint Years Months

Sentence Range Years Months TO Years Months

Recommendation Adjusted for Mandatory Minimum

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

- Recommended for Alternative Punishment Not Applicable
- NOT Recommended for Alternative Punishment



Final Disposition Fill in after sentence has been pronounced.

◆ SENTENCE

	Years	Months	Days	
Total Time Imposed Before Suspension <input type="checkbox"/> Life Sentence +	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Total Time to Serve (effective) <input type="checkbox"/> Life Sentence +	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Sentenced to Time Served
Post Release Term §18.2 -10	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Post Release Supervision Period §19.2 - 295.2 (A)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Probation Period (Supervised) §19.2 - 303 <input type="checkbox"/> Indefinite	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Check all that apply

- Incarceration Sentence to Run Concurrently With Another Sentencing Event
- Written Plea Agreement Accepted Oral Sentence Recommendation Accepted
- Restitution \$, , . Fine \$, , .

Other Sentencing Programs *(Check all that apply)*

- Day Reporting
- Diversion Center Incarceration
- Electronic Monitoring
- Unsupervised Probation
- §18.2-251
- Community-Based Program _____
Specify type or name of program
- Detention Center Incarceration
- Drug Court
- Intensive Probation
- Youthful Offender
- Other _____
Specify type or name of program

Office Use Only

<input type="text"/>	<input type="text"/>
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◆ REASON FOR DEPARTURE

Must be completed pursuant to §19.2-298.01(B)

Office Use Only

<input type="text"/>	<input type="text"/>	<input type="text"/>
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◆ SENTENCING DATE

<input type="text"/>	<input type="text"/>	<input type="text"/>
Month	Day	Year

Judge's Signature

◆ ATTACH COURT ORDER AND MAIL

Pursuant to §19.2-298.01(E) _____

After sentencing, send to:

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

Office Use Only

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Error Code	Audit Code	PSI	Misc.

Weapon/Firearm Section A

Offender Name: _____

◆ Primary Offense

- A. Maliciously discharge firearm, etc., in/at occupied building (1 count)..... 2
- B. Discharge firearm from vehicle (1 count) 1
- C. Possess firearm on school property (1 count) 1
- D. Possession of sawed-off shotgun (1 count)..... 2
- E. False statement on consent form (1 count) 4
- F. Possession of firearm or concealed weapon by convicted felon
 - 1 count 3
 - 2 counts 4

Score

0	
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◆ Primary Offense Additional Counts Total the maximum penalties for counts of the primary not scored above

- Years: 5 - 7 1
- 8 - 18 2
- 19 - 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 - 7 1
- 8 - 18 2
- 19 - 28 3
- 29 - 38 4
- 39 or more 5

0	
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◆ Victim Injury

- Threatened, emotional or physical 1
- Serious physical 2

0	
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◆ Mandatory Firearm Conviction for Current Event If YES, add 6

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 2 0
- 2 - 38 1
- 39 or more 2

0	
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◆ Prior Incarcerations/Commitments If YES, add 4

0	
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◆ Legally Restrained at Time of Offense

- None 0
- Other than post-incarceration supervision 2
- Post-incarceration supervision 5

0	
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Total Score

If total is 8 or less, go to **Section B**. If total is 9 or more, go to **Section C**.

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Weapon/Firearm Section B

Offender Name: _____

◆ Primary Offense

- A. Maliciously discharge firearm, etc., in/at occupied building (1 count).....7
- B. Discharge firearm from vehicle (1 count)8
- C. Possess firearm on school property (1 count)7
- D. Possession of sawed-off shotgun (1 count)6
- E. False statement on consent form (1 count)1
- F. Possession of concealed weapon - not firearm by convicted felon (1 count)7
- Possession of firearm by convicted felon (1 count)7

Score

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

- Years: 5 - 92
- 10 - 193
- 20 - 294
- 30 - 395
- 40 or more6

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

- Years: Less than 10
- 1 - 92
- 10 - 193
- 20 - 294
- 30 - 395
- 40 or more6

0	
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◆ Victim Injury

- Threatened, emotional or physical2
- Serious physical3

0	
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◆ Legally Restrained at Time of Offense

If YES, add 1 →

0	
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Total Score

See **Weapon/Firearm Section B Recommendation Table** to convert score to guidelines sentence.

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Weapon/Firearm Section C

Offender Name: _____

Primary Offense _____

Prior Record Classification

Category I Category II Other

A. Maliciously discharge firearm, etc. in/at occupied building			
Attempted or conspired: 1 count	32	16	8
Completed: 1 count	56	28	14
B. Discharge firearm from vehicle (1 count)	48	24	12
C. Possess firearm on school property (1 count)	32	16	8
D. Possession of sawed-off shotgun (1 count)	36	18	9
E. False statement on consent form (1 count)	32	16	8
F. Possession of firearm or concealed weapon by convicted felon (1 count)	32	16	8

Score

▼

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

Maximum Penalty: 5, 10 (years) 1

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

Maximum Penalty: Less than 5 (years) 0

 5, 10 1

 20 2

 30 3

 40 or more 5

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Firearm Used or Brandished _____ If YES, add 2 →

0	0	
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Victim Injury _____

Threatened or emotional 2

Physical 4

Serious physical 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 20 (years) 0

 20, 30, 40 or more 1

0	0	
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Prior Felony Convictions/Adjudications Against Person _____

Number: 1 1

 2 2

 3 3

 4 4

 5 or more 5

0	0	
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Prior Felony Convictions/Adjudications with the Same VCC Prefix as Primary Offense _____

Number: 1 2

 2 4

 3 6

 4 8

 5 or more 10

0		
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Legally Restrained at Time of Offense _____ If YES, add 2 →

0	0	
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Total Score _____

See Weapon/Firearm Section C Recommendation Table for guidelines sentence range.

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Additional Offenses Continuation Sheet

Offender Name: _____

Offense	Counts	VCC	Offense Date		
			Month	Day	Year
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