

**GENERAL DISTRIBUTION**

**WEST VIRGINIA  
DIVISION OF CORRECTIONS  
& REHABILITATION**

**NUMBER: 400.01**

**EFFECTIVE DATE: 08 November 2024**

**SUBJECT: ADMISSION PROCEDURES AT  
JAILS & SHORT-TERM  
HOLDING FACILITIES**

# **POLICY DIRECTIVE**

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**PURPOSE:**

To provide a policy that details a coordinated system of admission and booking procedures for arrestees arriving at a jail or short-term holding facility.

**REFERENCE:**

WV Code §§15A-5-6, 15A-5-9, and 61-5-8; ACA Expected Practices 5-ALDF-2A-18; 5-ALDF-2A-19, 5-ALDF-2A-20, 5-ALDF-2A-21, 5-ALDF-2A-22, 5-ALDF-2A-23, and 5-ALDF-2A-24; Prison Rape and Elimination Act (PREA) §§115.33, 115.41 and 115.42; and National Commission on Correctional Health Care (NCCHC) §J-E-02.

**RESPONSIBILITY:**

Superintendents of jails and facilities with short-term holding are responsible for enacting facility-specific Operational Procedures and ensuring the requirements of this Policy Directive are included in applicable Post Orders.

**CANCELLATION:**

Any previous written instruction on the subject including DCR Policy Directive 400.01, dated 03 April 2024.

**APPLICABILITY:**

All jails and short-term holding facilities within the Division of Corrections and Rehabilitation (DCR). This Policy is available for general distribution.

**DEFINITIONS:**

**Booking:** A procedure for the admission of a person charged with or convicted of an offense, which includes searching, fingerprinting, photographing, medical screening, and

collecting personal history data. Booking also includes the inventory and storage of the individual's personal property.

**Booking Officer:** A Correctional Officer assigned booking duties.

**Clothed Body Search:** (commonly referred to as a "pat search") A search of an individual by running of the hands over the clothed body to determine whether the individual possesses contraband.

**Commitment:** An adult inmate incarcerated with an order signed by a magistrate or judge, sentenced on a misdemeanor or felony charge; a pre-trial inmate that has been arraigned; and Division of Corrections and Rehabilitation inmates.

**Court Disposition Report (CDR):** (West Virginia State Police Form 29) Temporary commitment order.

**Criminal Complaint:** A formal written statement of the essential facts constituting the offense charged.

**Dangerous Material:** As defined in WV Code §61-5-8; any incendiary material or device, highly flammable or caustic liquid, explosive, bullet or other material readily capable of causing death or serious bodily harm.

**Implement of Escape:** As defined in WV Code §61-5-8; a tool, implement, device, equipment or other item which an inmate is not authorized to possess capable of facilitating, aiding or concealing an escape or attempted escape by an inmate.

**LiveScan:** The technology used to capture fingerprints electronically, without the need for the more traditional method of ink and paper. The fingerprints are securely transmitted to a government agency, which performs a criminal history background check.

**Medical Staff Member:** A physician, physician assistant, registered nurse, licensed practical nurse, or other health trained staff member employed by the contractual medical provider.

**Prison Rape Elimination Act (PREA):** A federal law established to address the elimination and prevention of sexual assault and/or sexual harassment in the correctional system.

**Short-Term Holding Facility:** Facilities designated by the Commissioner to hold newly committed pre-trial and/or convicted inmates for a period not to exceed forty-eight (48) hours.

**Telecommunication Device:** As defined in WV Code §61-5-8; any type of instrument, device, machine or equipment which is capable of transmitting telephonic, electronic, digital, cellular or radio communications or any part of an instrument, device, machine or equipment which is capable of facilitating the transmission of telephonic, electronic,

digital, cellular or radio communications regardless of whether the part itself is able to transmit. The term includes, but is not limited to, cellular phones, digital phones, and modem equipment devices.

**Temporary Commitment:** An adult inmate that has been incarcerated by the arresting officer with or without a warrant charged with a misdemeanor or felony charge and has not yet been arraigned by a judge or magistrate.

**Unclothed Body Search:** (commonly referred to as a “strip search”) A non-intrusive search of an inmate which requires an inmate to remove or arrange some or all clothing so as to permit a visual inspection of the areas around the person’s breasts, buttocks, genitalia, or any large folds of skin that may permit the hiding of contraband.

**Video Arraignment:** The initial appearance and arraignment of a newly committed pre-trial inmate by a magistrate of the charging jurisdiction via a video imaging system.

**Warrant:** A document signed by a judge or magistrate to arrest an offender when it is believed probable cause exists based on the criminal complaint that the offense has been committed and that the alleged offender committed it.

**Weapon:** As defined in WV Code §61-5-8; an implement readily capable of lethal use and includes firearm, knife, dagger, razor, other cutting or stabbing implement or club. This term includes any item which has been modified or adapted so that it can be used as a firearm, knife, dagger, razor, other cutting or stabbing implement or club. For purposes of this definition the term “firearm” includes an unloaded firearm or the unassembled components of a firearm. For the purposes of this Policy, this includes ammunition.

**Weekend Jail Program:** A sentencing option authorized by state code, under which an inmate is sentenced to intermittent periods of confinement in the jail (typically weekends, holidays, or other days normally off from work) as specified in the court order. Admission and booking procedures for inmates sentenced to the “weekend jail program” are contained in Policy Directive 400.06.

## **POLICY:**

- I. The following admission process of all new inmates will be followed in sequential order at all jail and short-term holding facilities and begin immediately upon the arrestee’s arrival.
- II. The booking officer reviews commitment paperwork to determine that the inmate is legally committed to the facility and ensures the paperwork is certified, complete, appears valid, and accurate. If inaccuracies exist, the arrestee is not accepted, and the committing agency/court is contacted immediately.
  - A. A certified court order committing the inmate; or in the case of a “temporary” commit, the officer must have an arrest warrant, capias, Court Disposition Report (CDR) accompanied with a completed temporary commit or other appropriate documentation

for the inmate to be arraigned. All committing paperwork is to be signed by the law enforcement officer, parole/probation officer, judge, or magistrate.

- B. Individuals are not accepted who are being committed solely because of the initiation of procedures for involuntary commitment pursuant to WV Code §27-5-1 *et. seq.*, or who have been charged only with the offense of public intoxication unless a court order is presented at the time of commitment.
- III. An officer of the same gender conducts a clothed body search checking for weapons and other obvious contraband before removal of handcuffs. Cross gender and transgender clothed body searches will be completed by a staff member of the same anatomical make-up and external genitalia as the individual. This search will take place in a secure sally-port area. After the pat search is completed, the medical clearance assessment is completed in the secure sally-port with mechanical restraints still applied.
- A. Contraband items not authorized to possess and introduce into the secure area of the facility, and are not considered evidence of a crime, will be dropped into a secure box (where available) located at the initial entry door of each intake area. This secure box will be emptied by the end of each shift and items will be disposed of in a manner to ensure inmates do not gain access to the items and the items do not enter secure areas.
  - B. Each facility's Operational Procedure will ensure seized items, such as weapons, ammunition, drugs, tobacco, and other dangerous materials are not introduced into the secure area of the facility. Items prohibited by WV Code §61-5-8 (alcoholic liquor, non-intoxicating beer, poison, implement of escape, dangerous material, weapon, and controlled substances) are not to be stored in property rooms and will be removed from the secure area of the facility with the exception of telecommunication devices which will be secured in a secure property storage location as identified by the Superintendent/designee.
  - C. All items found in possession of or on the arrestee are confiscated, thoroughly searched, and processed as follows.
    - 1. Food items are disposed of and liquids such as alcoholic liquor and non-intoxicating beer are disposed of by pouring down the drain.
    - 2. Prescribed medications in a properly labeled medication container with the inmate's name affixed and within usable date frames, are inventoried as received and immediately provided to the medical staff member conducting the medical clearance assessment.
    - 3. Items that do not fit in the secure box or when a secure box is not available, will cause the Shift Commander or designee to report to the intake location to take immediate control of said items for immediate removal from the secure area. If an inmate states that he or she does not want an item destroyed due to being an heirloom, it will be stored in a secure location for thirty (30) calendar days in order for the inmate to arrange for pickup by a person from the community. If the inmate

fails to schedule pickup, all such items will be disposed of on the thirty-first (31<sup>st</sup>) day or as soon thereafter as practical.

4. Telecommunication devices (including charger, ear buds, etc.) are confiscated immediately upon discovery and placed in a “valuables locker or drop box” where available or property bag assigned to the inmate.
  5. Items that may be evidence of a crime, including illegal substances, are turned over to the arresting/transporting officer and the Shift Commander notified. A detailed incident report of the findings will be completed as soon as practical.
- D. The Inmate Personal Property Inventory (**Attachment #1**) may be started as items are removed from the inmate and retained.
- IV. Allow arresting/transporting officer to utilize LiveScan to book arrestee using arresting agency’s Originating Agency Identifier (ORI).
- V. The booking officer or medical staff member will observe the arrestee and make inquiries about the physical condition of the arrestee from the transporting/arresting officer and the arrestee being received. The physical condition of the arrestee is documented and if necessary, document injuries with photographs.
- A. The booking officer shall not accept custody of an arrestee when a medical staff member determines the arrestee is in obvious need of medical attention of a degree necessitating treatment by a physician, which may include an obvious positive body scan for suspected drugs or dangerous material detected inside the arrestee’s body that is not recovered through strip search procedures. If an arrestee is refused pursuant to the provisions of this section, he or she is not accepted until a written clearance from a licensed physician reflecting that the arrestee has been examined and if necessary treated, and which states that it is the physician’s medical opinion that the arrestee can be safely housed in a jail. If in the Shift Commander’s opinion, contrary to medical’s determination, the arrestee is in obvious need of medical attention of a degree necessitating treatment by a physician, the arrestee is refused, and the Superintendent notified through the Shift Commander’s chain of command. Failure to Meet Medical Guidelines Upon Arrival (**Attachment #2**) is completed any time an arrestee is refused pursuant to this section. The original is maintained by the booking department and a copy provided to the medical department.
- B. If the arrestee has been exposed to an aerosol defense spray, such as Oleoresin Capsicum (OC) or chemical mace, electronic stunning devices, or other impact munitions; the booking officer requests the assistance of the Shift Commander and a medical staff member to determine if the inmate needs medical treatment. Decontamination procedures will be implemented as soon as practical.
- C. An appropriate medical staff member completes a medical clearance assessment to clear the arrestee for acceptance prior to the transporting officer leaving the facility. The assessment is based upon an examination which may include inquiries of the

arrestee as well as personal observations. The medical clearance assessment is documented appropriately and becomes part of the inmate's medical record. All arrestees are administered a drug screen urinalysis (to be used solely for medical assessment and treatment purposes) and female arrestees are additionally administered a pregnancy test prior to body scan procedures.

- D. For facilities without full-time medical staff on site, the medical clearance assessment is conducted by trained officers based upon inquiries of the arrestee as well as personal observations. Individuals who are unconscious, semiconscious, excessively bleeding, mentally unstable, severely intoxicated, exhibiting symptoms of alcohol or drug withdrawal, or otherwise urgently in need of medical attention are referred immediately to a community hospital for care and medical clearance into the facility. Upon return, a written medical clearance is necessary in order to accept admission. The medical clearance assessment is recorded on a form approved by the Director of Correctional Healthcare and contains the arrestee's name and time and date of the assessment.
  - E. In the event the arresting/transporting officer refuses to follow WV Code §15A-5-9 and transport the arrestee for medical attention, the Shift Commander will be notified. The Superintendent/designee may contact the arresting agency's Chief/Sheriff/etc. in an effort to gain compliance with State Code. If all efforts to gain compliance fail, the Shift Commander shall arrange for the arrestee to receive appropriate medical attention. Staff members witnessing the officer's refusal shall file an incident report as soon as practical.
- VI. The booking officer conducts a body scanner search of each inmate in accordance with DCR Policy Directive 308.13. Inmates who have already been scanned are kept separate from any other inmate waiting for intake processing. Mechanical restraints are removed prior to the body scan. This takes place prior to formally accepting custody of the arrestee.
  - VII. The booking officer formally takes custody of the inmate by allowing arresting/transporting officer to sign the custody transfer section of the Booking/Movement to Population Record (**Attachment #3**).
  - VIII. The booking officer fingerprints and photographs every inmate on the Livescan device. Three (3) photographs (also known as "mugshots") are taken; front view, left profile and right profile. The three (3) photographs will be immediately uploaded to the Offender Information System (OIS).
- A. For an unknown person being committed to a correctional facility, if LiveScan positively identifies the inmate, notify the arresting officer and the appropriate court prior to the inmate's arraignment.

- B. If the identity of the inmate is still unknown upon completion of the LiveScan, the inmate is booked in as either John or Jane Doe and the booking officer will immediately notify the Shift Commander and file an incident report as soon as practical.
  - C. The inmate remains in booking until the arresting agency or committing court has positively identified the inmate and provides a new commitment order stating the inmate's legal name.
  - D. Upon receiving a new commitment order with the inmate's legal name, OIS is updated, and the inmate housed accordingly.
- IX. The booking officer begins processing the inmate by recording basic personal data and completing appropriate paperwork.
- A. Conduct search of inmate's social security number in OIS to determine any previous record of incarceration. If no record is found, search the inmate's first, middle and last name and/or date of birth for prior incarcerations. The inmate retains the Offender Identification Number (OID#) contained in OIS.
  - B. The inmate's name and jurisdiction are placed on the billing sheet and a booking/legal file created for each inmate.
  - C. Complete the Booking/Movement to Population Record (**Attachment #3**).
  - D. Complete the Personal Data Sheet (**Attachment #4**) by obtaining information from the inmate.
    - 1. If the inmate is a Registered Sex Offender from any jurisdiction, email or fax a copy of the completed Personal Data Sheet (**Attachment #4**) to the US Marshal Service District Office in the district where the inmate is being held. **NOTE: THE SOCIAL SECURITY NUMBER MUST BE BLACKED OUT PRIOR TO EMAILING THE PERSONAL DATA SHEET.**
    - 2. Jails in Northern District of West Virginia (CRJ, ERJ, NCRJ, NRJ, PHRJ, and TVRJ) send to Deputy US Marshal Fred Frederick at USMS Clarksburg Fax: (304) 623-5708 or [Wesley.Frederick@usdoj.gov](mailto:Wesley.Frederick@usdoj.gov)
    - 3. Jails in Southern District of West Virginia (SCRJ, SRJ, SWRJ, and WRJ) send to Deputy US Marshal Mark Waggamon at USMS Charleston Fax: (304) 347-5607 or [Mark.Waggamon@usdoj.gov](mailto:Mark.Waggamon@usdoj.gov)
  - E. Cash money is counted, documented on Inmate Funds Confiscated Upon Booking (**Attachment #5**) as the exact amount, and processed in accordance with established procedures for depositing into the inmate's trustee account and the inmate is issued a receipt.

1. Cash that cannot be processed for any reason (e.g., wrinkled currency that electronic device will not accept) shall have the bottom section of Attachment #5 completed. The cash and a completed copy of **Attachment #5** shall be placed in an envelope and secured until fiscal staff is able to process on the next regular business day.
  2. No cash is to be placed in the inmate's personal property.
  3. Checks, checkbooks, money orders, credit/debit cards or other funds not authorized for deposit are inventoried and placed in secure storage.
  4. If an inmate states that he/she does not want a coin or a piece of currency deposited to his or her account because it is a rare coin or currency (e.g., gold or silver coin, silver certificate, etc.) this item is to be inventoried and placed in secure storage.
  5. Complete Jail Processing Fee Notice (Attachment #1 to DCR Policy Directive 111.07). The inmate and fiscal section are provided with a copy of this completed form.
- F. Temporary committed inmates are provided information on the video arraignment process by having the inmate sign the Information to Defendant: Initial Appearance Via Video (**Attachment #6**). A copy of the signed form is provided to the inmate and the applicable magistrate court.
- G. A copy of the Supreme Court of Appeals of West Virginia; Affidavit: Eligibility for Appointed or Public Defender Counsel (**Attachment #7**) is provided to each inmate, to be used at the inmate's discretion as required by the court.
- H. All inmate property is searched, inventoried, and properly recorded on the Inmate Personal Property Inventory (**Attachment #1**) prior to being placed in secure storage. The description of items will be in sufficient enough detail for easy identification to include condition of the item. A copy of the completed inventory form is provided to the inmate.
1. Searches of all items are critical to ensure that no contraband enters the facility. All property, including clothing worn into the facility, is carefully and thoroughly searched.
  2. All items are removed from containers in which they are carried, and each item examined to ensure that it does not conceal contraband or other unauthorized items.
  3. Care must be taken neither to damage nor destroy personal property. If this should happen, an incident report will be completed by the staff involved.
  4. The following items may be retained by the inmate after being thoroughly searched. This is noted on the Inmate Personal Property Inventory form.



- a. Corrective eyeglasses (two pair)
  - b. Contact lens (one pair & case)
  - c. Wedding ring/band (one, if legally married, no stones)
  - d. Legal materials (reasonable quantity)
- I. Ask the inmate if he or she has ever served in the military. If the answer is yes, complete the Veteran Screening (**Attachment #8**). A copy of the completed form is provided to the Unit Manager/designee.
- J. Complete intake information in OIS. Upload mugshots from West Virginia State Police website (this step is not required until access becomes available.) Upload all appropriate documents. Photographs of all scars, marks and tattoos, in non-intimate areas (to include genitalia, pubic area, anus, and female breasts) are taken and uploaded to OIS.
- K. Provide each inmate a copy of the *PREA Educational Information* (attachment to the DCR PREA Manual) during intake/booking and have the inmate sign the PREA Offender Education Confirmation (attachment to the DCR PREA Manual).
- L. Inform the Booking Supervisor or Shift Commander of all inmates who have been committed for thirty (30) days or less. The Booking Supervisor or Shift Commander is responsible for calculating the sentence for the release date using the Inmate Recap Report in OIS and recording in the release book. The Booking Supervisor or Shift Commander also provides a copy of the court order and recap report to a staff member designated by the Superintendent to ensure the release date is correct.
- X. A medical receiving screening in accordance with DCR Policy Directive 400.04 is conducted by appropriate medical personnel and documented in the inmate's medical record. The medical staff member completing the receiving screening immediately notifies the Shift Commander if it is determined, through risk screening and/or observation, the inmate is suicidal, at risk of suicide, risk of sexual victimization, transgender or gender diverse, or has mental/physical/developmental disabilities requiring other than general population classification.
- XI. An inmate awaiting arraignment for his/her charges will be housed in a holding cell until the arraignment is complete and a commitment order has been received.
- A. Temporary commitments remain in their civilian clothing after a thorough clothed body search of the inmate's person has been conducted. **An unclothed body search of a**

temporary commitment is only conducted if there is reasonable suspicion of contraband, or the body scanner reveals a positive indication of contraband.

- B. Temporary commitments are not showered and retain only one layer of clothing. Exception: If a medical staff member verifies during the medical receiving screening that the temporary commitment has an active case of vermin requiring treatment, the inmate will be showered and deloused prior to being placed in a holding cell.
  - C. Temporary commitments do not retain coats/jackets/outerwear, jewelry, belts, shoes, or any other personal effects. They will be issued sandals, and if not adequately dressed, he/she will be issued the appropriate clothing needed.
- XII. Inmates are issued their Offender Identification Number (OID#) and Personal Identification Number (PIN) for the inmate phone system. The booking officer allows each inmate to make phone calls. If phones are not located in the holding cell, each inmate is permitted up to three (3) completed local or long distance collect telephone calls to secure counsel, arrange bond, or to contact family or friends. Such calls will be limited to a reasonable amount of time, not to exceed five (5) minutes per call and are conducted with as much privacy as possible, consistent with security and supervision requirements.
- XIII. Each inmate assigned to a housing unit is subjected to an unclothed body search, deloused, showered, and changed into newly issued inmate clothing prior to housing.
- A. An unclothed body search is conducted by the same gender officer. Cross gender and transgender unclothed body searches should be completed by a staff member of the same anatomical make-up and external genitalia as the individual. All clothing removed from the inmate is searched and secured.
  - B. The delousing agent is applied by a correctional officer of the same gender in accordance with product instructions regarding required wait time, via a spray bottle or applicator, prior to allowing the inmate to shower. Shower facilities in the intake/booking area are used; required personal hygiene items and linens are provided by the facility.
  - C. Inmates are issued initial institutional clothing, bedding/linens, and personal hygiene supplies in the quantities designated on the Inmate Issue Form (**Attachment #9**) upon completion of the showering process.
  - D. Each inmate is provided a paper copy of the Inmate Handbook as required by BPJ Protocol 102.
  - E. Each inmate is provided a copy of DCR Policy Directive 325.00 containing the rules of inmate conduct.

- F. Each inmate is provided the *Notice of Inmate/Resident Rights Under the Americans with Disabilities Act* as required by DCR Policy Directive 450.02.
- G. Each inmate is issued an Identification (ID) Card in accordance with DCR Policy Directive 400.02.
- H. The Shift Commander or Booking Supervisor (as assigned in Operational Procedure and Post Order) assigns initial housing, based on various factors including the inmate's initial classification, gender, court status, severity of charges, prior institutional behavioral/disciplinary history.
1. Prior to initial housing assignment, an appropriate staff member completes the PREA Screening Assessment (attachment to the DCR PREA Manual) by meeting face-to-face with each inmate. This initial screening assesses the risk of being sexually abused by other inmates or sexually abusive toward other inmates. **As determined by the Screening Assessment, a Sexual Predator will never be housed in the same cell with a Potential Victim or Victim.**
  2. Inmates who are violent, suicidal, mentally disordered, demonstrating unusual or bizarre behavior or determined to be in need of professional mental health services, will be housed in a "manned section" in order to observe the inmate's behavior at least every fifteen (15) minutes, until evaluated by a mental health professional.
  3. The Shift Commander or Booking Supervisor (as assigned in Operational Procedure and Post Order) will ensure the inmate is added to appropriate count forms and count boards.
- XIV. Prior to being escorted to his or her housing assignment, a body scanner search will again be conducted on all inmates to prevent the introduction of contraband into the housing units. Inmates who have completed this scan will be kept separate from any other inmate waiting for intake processing or housing.
- XV. The following completed documents comprise the "***booking packet***" and are to be bundled in the following order prior to uploading to the inmate's record in OIS Document Management:
- 1) Booking/Movement to Population Record (Attachment #3 to this Policy)
  - 2) Inmate Personal Property Inventory (Attachment #1 to this Policy)
  - 3) Pre-Scanning Questionnaire (Attachment #6 to DCR Policy Directive 308.13)
  - 4) Jail Processing Fee Notice (Attachment #1 to DCR Policy Directive 111.07)
  - 5) Veteran Screening – if applicable (Attachment #8 to this Policy)

- 6) Personal Data Sheet (Attachment #4 to this Policy)
- 7) Inmate Funds Confiscated Upon Booking (Attachment #5 to this Policy)
- 8) Acknowledgement Receipt (Attachment #2 to BPJ Protocol 102)
- 9) Inmate Issue Form (Attachment #9 to this Policy)

**NOTE:** Information to Defendant: Initial Appearance Via Video (Attachment #6 of this Policy) and Supreme Court of Appeals of West Virginia – Affidavit: Eligibility for Appointed or Public Defender Counsel (Attachment #7 of this Policy) are not to be made part of the “booking packet” uploaded to OIS.

Committing documents (e.g., court order, magistrate order, etc.) and PREA documentation are uploaded to the appropriate locations in OIS and not contained in the “booking packet.”

**ATTACHMENT(S):**

- #1 Inmate Personal Property Inventory
- #2 Failure to Meet Medical Guidelines Upon Arrival
- #3 Booking/Movement to Population Record
- #4 Personal Data Sheet (2 pages)
- #5 Inmate Funds Confiscated Upon Booking
- #6 Information to Defendant: Initial Appearance Via Video
- #7 Supreme Court of Appeals of West Virginia -  
Affidavit: Eligibility for Appointed or Public Defender Counsel
- #8 Veteran Screening
- #9 Inmate Issue Form

APPROVED SIGNATURE:



William K. Marshall III, Commissioner

11/8/2024

Date



**WV DIVISION OF CORRECTIONS & REHABILITATION**

**FAILURE TO MEET MEDICAL GUIDELINES UPON ARRIVAL**

Facility: \_\_\_\_\_

Time: \_\_\_\_\_ Date: \_\_\_\_\_

Offender Name: \_\_\_\_\_ OID # (if applicable): \_\_\_\_\_

Name of transporting officer/agency: \_\_\_\_\_

Reason for denial/criteria not met:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Denied by: \_\_\_\_\_

**MEDICAL CLEARANCE COMPLETED AND OFFENDER RETURNED TO FACILITY?**

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, date and time returned: \_\_\_\_\_

**\*\*A copy of the medical clearance shall be attached to this form.**

Original maintained by Booking Department

cc: uploaded to document management if offender has record in OIS  
medical department

*WV Code §15A-5-9(a) Notwithstanding any other provision of this code, the commissioner, or any employee or agent of the division, having authority to accept offenders in a jail is not required to accept those offenders if an offender appears to be in need of medical attention of a degree necessitating treatment by a physician. If an offender is refused pursuant to the provisions of this section, he or she may not be accepted for detention until a written clearance is received from a licensed physician reflecting that the offender has been examined and if necessary treated, and which states that it is the physician's medical opinion that the offender can be safely housed in a jail.*

**WV DIVISION OF CORRECTIONS & REHABILITATION**

Booking/Movement to Population Record

(Please print except where signature required)

( ) Temp ( ) Commit ( ) Weekend

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ OID #: \_\_\_\_\_

Arresting agency: \_\_\_\_\_ Arresting Officer: \_\_\_\_\_

Transporting Officer: \_\_\_\_\_ County/Jurisdiction: \_\_\_\_\_

Comments from Transporting Officer: \_\_\_\_\_

**Custody Transferred from arresting agency to WVDCR** \_\_\_\_\_

Signature of arresting/transporting officer

Initial Pat Search By: \_\_\_\_\_ Booking Officer: \_\_\_\_\_

Property Searched By: \_\_\_\_\_ Initial Body Scan By: \_\_\_\_\_

Medical Receiving Screening By: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Sentence Recap By: (if applicable) \_\_\_\_\_ PREA Screening By: \_\_\_\_\_

Shift Comm. assigned housing: \_\_\_\_\_ Second Body Scan By: \_\_\_\_\_

**I HAVE BEEN ADVISED OF THE FOLLOWING:**

1. All letters and packages into and out of this facility may be opened and inspected for contraband.
2. **ALL CALLS EXCEPT THOSE TO MY ATTORNEY OF RECORD MAY BE MONITORED, INTERCEPTED, RECORDED, AND DISCLOSED.**
3. All personal property left upon my release will be disposed of 30 days after the date of my release.

Inmate Signature: \_\_\_\_\_ Officer Signature: \_\_\_\_\_

**WV DIVISION OF CORRECTIONS & REHABILITATION  
PERSONAL DATA SHEET**

Date/Time of Booking: \_\_\_\_\_ Facility: \_\_\_\_\_

Arresting Agency: \_\_\_\_\_ Current Offense(s): \_\_\_\_\_

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Suffix (e.g. Jr., III)

Birthdate: \_\_\_\_\_ SSN# \_\_\_\_\_  
(BLACK OUT BEFORE EMAILING FORM)

White / Black / Hispanic / Other                      Male / Female

\_\_\_\_\_  
City of Birth                      County of Birth                      State of Birth                      Country of Birth

US Citizen    Yes / No                      Hispanic / Non-Hispanic  
*If not US citizen contact ICE – William Howland #304-343-3570 / 412-627-3197 (after hours)*

Height: Ft. \_\_\_\_\_ In. \_\_\_\_\_                      Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Facial Hair: \_\_\_\_\_ Complexion: \_\_\_\_\_

Suicidal?    Yes / No                      Sexual-related offense?    Yes / No                      Substance withdrawal?    Yes / No

Marital Status:                      married                      single                      separated                      divorced                      widowed

Primary Language:    English / Spanish / Other \_\_\_\_\_                      Religious preference: \_\_\_\_\_

Employment status:    Employed / Unemployed

Last job held: \_\_\_\_\_                      Months on last job: \_\_\_\_\_

Highest education level completed:    high school diploma                      GED                      some college                      other

Registered Sex Offender    Yes / No                      If yes, jurisdiction of conviction: \_\_\_\_\_  
(County / State)

Veteran:                      Yes / No                      If yes, complete Veteran Screening (Attachment #7)

Current address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Aliases/Maiden Name: \_\_\_\_\_

Emergency Contact:    Name : \_\_\_\_\_                      Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_





**INMATE FUNDS CONFISCATED UPON BOOKING**

Inmate Name: \_\_\_\_\_  
 OID #: \_\_\_\_\_

Date: \_\_\_\_\_

**Money confiscated & Receipt issued.**

<b>Bills</b>	<b>Quantity</b>	<b>Total</b>	<b>Coins</b>	<b>Quantity</b>	<b>Total</b>
\$1.00	x _____	= \$ _____	\$0.01	x _____	= \$ _____
\$2.00	x _____	= \$ _____	\$0.05	x _____	= \$ _____
\$5.00	x _____	= \$ _____	\$0.10	x _____	= \$ _____
\$10.00	x _____	= \$ _____	\$0.25	x _____	= \$ _____
\$20.00	x _____	= \$ _____	\$0.50	x _____	= \$ _____
\$50.00	x _____	= \$ _____			
\$100.00	x _____	= \$ _____			
	<b>Total Bills:</b>	\$ _____		<b>Total Coins:</b>	\$ _____
				<b>Grand Total:</b>	\$ _____

Checks, checkbooks, money orders, credit/debit cards will be inventoried and placed in a secure storage.

Inmate Signature: \_\_\_\_\_ Officer Signature: \_\_\_\_\_

**Money not accepted by Booking Kiosk and placed in an Envelope for Fiscal.**

<b>Bills</b>	<b>Quantity</b>	<b>Total</b>	<b>Coins</b>	<b>Quantity</b>	<b>Total</b>
\$1.00	x _____	= \$ _____	\$0.01	x _____	= \$ _____
\$2.00	x _____	= \$ _____	\$0.05	x _____	= \$ _____
\$5.00	x _____	= \$ _____	\$0.10	x _____	= \$ _____
\$10.00	x _____	= \$ _____	\$0.25	x _____	= \$ _____
\$20.00	x _____	= \$ _____	\$0.50	x _____	= \$ _____
\$50.00	x _____	= \$ _____			
\$100.00	x _____	= \$ _____			
	<b>Total Bills:</b>	\$ _____		<b>Total Coins:</b>	\$ _____
				<b>Grand Total:</b>	\$ _____

Officer Signature: \_\_\_\_\_

**WV DIVISION OF CORRECTIONS & REHABILITATION**

**INFORMATION TO DEFENDANT: INITIAL APPEARANCE VIA VIDEO**

STATE OF WEST VIRGINIA

v.

Case No(s): \_\_\_\_\_

or

Social Security No.: \_\_\_\_\_

\_\_\_\_\_  
*(Full Name of Defendant)*

\_\_\_\_\_  
*(Last four #s)*

Your first court appearance will occur here at the jail by video. There is a camera and a monitor in the room so that you and the magistrate can see and talk with one another. At the initial appearance, the magistrate will review the charge(s) against you, inform you of your constitutional rights and discuss the amount and conditions of bail by which you may be released from jail before trial. You will be asked to complete some forms throughout the initial appearance.

If there is someone who may be able to post bond to meet the bail requirements that the magistrate may set, you may make a phone call to that person and ask them to go to the magistrate court. Bail cannot be posted at the jail. Bond is posted at: \_\_\_\_\_.

*(County Name of Magistrate Court)*

Jail staff will allow you to make a phone call to make arrangements for bail.

I understand the above and (defendant to check one of the following):

I do not wish to make a phone call.

I wish to make a phone call. \*

\_\_\_\_\_  
*Defendant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Staff Signature*

\_\_\_\_\_  
*Date*

\*Time call made (to be completed by jail staff): \_\_\_\_\_

Original to inmate

cc: magistrate court (if applicable)

**SUPREME COURT OF APPEALS OF WEST VIRGINIA  
AFFIDAVIT: ELIGIBILITY FOR APPOINTED OR PUBLIC DEFENDER COUNSEL**

NAME: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 SOCIAL SEC. #: XXX-XX-\_\_\_\_\_

CASE NO.(S): \_\_\_\_\_ COURT: MAGISTRATE  CIRCUIT  COUNTY  SUPREME

CHARGES: \_\_\_\_\_  
 CASE TYPE: FELONY  MISDEMEANOR  PROBATION REVOC  JUVENILE  MENTAL HYGIENE   
 ABUSE & NEG  EXTRADITION  CONTEMPT  OTHER-SPECIFY: \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_ Were you able to make bond? YES  NO   
 Do you plan to hire Private Counsel? YES  NO  Have you tried to hire Private Counsel? YES  NO

RESULT: \_\_\_\_\_

**GROSS MONTHLY INCOME:**  
*from ALL Sources*

- Employer \_\_\_\_\_
- Spouse's Employment \_\_\_\_\_
- 2nd Job \_\_\_\_\_
- Self-employment \_\_\_\_\_
- Public Assistance \_\_\_\_\_
- Food Stamps \_\_\_\_\_
- Unemployment Benefits \_\_\_\_\_
- Disability Benefits \_\_\_\_\_  
*(Workers' Comp/VA/Social Security)*
- Social Security/SSI \_\_\_\_\_
- Alimony/Child Support Rcvd \_\_\_\_\_
- Pension \_\_\_\_\_
- Rental Income \_\_\_\_\_
- Interest \_\_\_\_\_
- Dividends \_\_\_\_\_
- Annuities \_\_\_\_\_
- Odd Jobs \_\_\_\_\_
- Other \_\_\_\_\_

*(Explain)* \_\_\_\_\_

**TOTAL ASSETS:**

- Cash \_\_\_\_\_
- Checking/Savings Accounts \_\_\_\_\_
- Monies Owed to You \_\_\_\_\_
- Tax Refunds Due \_\_\_\_\_
- Value of Real Estate \_\_\_\_\_  
*(other than your residence)*
- Stocks \_\_\_\_\_
- Bonds \_\_\_\_\_
- Notes \_\_\_\_\_
- Other \_\_\_\_\_

*(Explain)* \_\_\_\_\_

**TOTAL ASSETS** \_\_\_\_\_

**VEHICLE(S):**

List Model and Year...  
 \_\_\_\_\_  
 \_\_\_\_\_

**SPOUSE'S VEHICLE(S):**

\_\_\_\_\_  
 \_\_\_\_\_

**TOTAL MONTHLY EXPENSES:**

- Rent/Mortgage \_\_\_\_\_
- Car Payments \_\_\_\_\_
- Loan Payments \_\_\_\_\_
- Utilities \_\_\_\_\_  
*(gas/elect/phone/water/sewage/heat)*
- Job-Related Expenses \_\_\_\_\_  
*(uniform/transportation/protective equipment/insurance premiums/child care/health care)*
- Alimony \_\_\_\_\_
- Child Support \_\_\_\_\_

**TOTAL MONTHLY EXPENSES** \_\_\_\_\_

**ONE-TIME EXPENSES:**

Other one-time debts you currently owe \_\_\_\_\_  
*(Medical Bills/Car/Home Repairs)*

*(Explain)* \_\_\_\_\_

**MONTHLY TOTAL (all sources)** \_\_\_\_\_

**NAMES OF DEPENDANTS SUPPORTED BY YOU:**

LAST NAME	FIRST NAME	RELATIONSHIP	AGE	DISABILITIES
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____

**Total Number of Dependents you support:** \_\_\_\_\_

**WARNINGS!**

**(1) False Swearing may Result in Criminal Prosecution; (2) The Information in This Affidavit is NOT Confidential and May Be Made Available to Other Persons!**

*I understand that by Court Order as a condition of probation or otherwise, I may be held responsible for repayment of court costs and the cost of my attorney to the extent determined to be reasonable in relation to my financial circumstances, and that such court order will become a valid judgement against me until paid.*

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Taken, subscribed, and sworn or affirmed before me by \_\_\_\_\_ this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in \_\_\_\_\_ County, WV.

**WV DIVISION OF CORRECTIONS & REHABILITATION**

**Veteran Screening**

**Date:** \_\_\_\_\_ **Name:** \_\_\_\_\_  
**D.O.B:** \_\_\_\_\_  
**SS#:** \_\_\_\_\_

**1. In what branch of the military did you serve? (Please Circle)**

**Air Force      Army      Coast Guard      Marines      Navy      National Guard**

**2. If service was National Guard, were you called to active duty?      YES      NO**

**3. Did you serve for at least two years (Active Duty)?      YES      NO**

**-- What year did you enter?      \_\_\_\_\_**

**-- When were you discharged?      \_\_\_\_\_**

**4. Were you discharged under honorable conditions?      YES      NO**

**If no, what type of discharge: \_\_\_\_\_**

**5. Are you currently enrolled at a VA Medical Center?      YES      NO**

**6. Need help obtaining DD-214?      YES      NO**

**cc:      Unit Manager/designee**

**WV DIVISION OF CORRECTIONS & REHABILITATION  
 INMATE ISSUE FORM FOR JAILS**

Inmate's Name: \_\_\_\_\_ OID# \_\_\_\_\_

Items	QTY	Size	Issued	Returned
Uniform Shirts	2		<input type="checkbox"/>	<input type="checkbox"/>
Uniform Pants	2		<input type="checkbox"/>	<input type="checkbox"/>
Underwear	3		<input type="checkbox"/>	<input type="checkbox"/>
Blanket	1	NA	<input type="checkbox"/>	<input type="checkbox"/>
Sheets	2	NA	<input type="checkbox"/>	<input type="checkbox"/>
Pillowcase	1	NA	<input type="checkbox"/>	<input type="checkbox"/>
Cup	1	NA	<input type="checkbox"/>	NA
Toothpaste & Toothbrush	1 of each	NA	<input type="checkbox"/>	NA
Deodorant	1	NA	<input type="checkbox"/>	NA
Soap* (can be combined shower, shave & shampoo product)	1	NA	<input type="checkbox"/>	NA
Shampoo* (can be combined shower, shave & shampoo product)	1	NA	<input type="checkbox"/>	NA
Comb	1	NA	<input type="checkbox"/>	NA
Towels	2	NA	<input type="checkbox"/>	<input type="checkbox"/>
Washcloths	2	NA	<input type="checkbox"/>	<input type="checkbox"/>
Laundry Bag	1	NA	<input type="checkbox"/>	<input type="checkbox"/>
Pair of Sandals	1		<input type="checkbox"/>	<input type="checkbox"/>
Pairs of Socks	3	NA	<input type="checkbox"/>	<input type="checkbox"/>
Pillow	1	NA	<input type="checkbox"/>	<input type="checkbox"/>
Mattress	1	NA	<input type="checkbox"/>	<input type="checkbox"/>
Bras (Female)	2		<input type="checkbox"/>	<input type="checkbox"/>
Feminine Hygiene Products if Needed (Female) (both tampons and feminine hygiene pads)		NA	<input type="checkbox"/>	NA
Identification (ID) Card	1	NA	<input type="checkbox"/>	NA

I acknowledge receiving the inmate property identified above. I agree and understand these items are the property of the Division of Corrections and Rehabilitation. I understand that I am responsible for returning these items in good condition. I agree to pay the replacement value for any of the above items which I fail to return to the facility in good condition.

<b>Property Issued:</b>
_____
<b>Inmate Signature</b>
_____
<b>Officer Issuing Signature</b>
<b>Date:</b> _____

<b>All Property Returned:</b>
_____
<b>Inmate Signature</b>
_____
<b>Officer Receiving Items Signature</b>
<b>Date:</b> _____