

## INITIAL FILE REVIEW

Center Name: \_\_\_\_\_

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

Classification Date Scheduled for: \_\_\_\_\_ Week 1 orientation and classes begin on: \_\_\_\_\_

<b>NAME:</b> <b>DORM:</b> <b>DOB:</b> <b>COUNTY:</b> <b>GDC #:</b>	<b>RACE:</b> <b>FROM:</b> <b>COUNSELOR:</b> <b>CASE #:</b> <b>STATUS:</b>	<b>Classes Needed</b>	<b>Classification use only:</b> ___ Wk Rel ___ AA ___ NA ___ PE ___ GED ___ ABE ___ SR ___ NPE OTHER:
<b>NAME:</b> <b>DORM:</b> <b>DOB:</b> <b>COUNTY:</b> <b>GDC #:</b>	<b>RACE:</b> <b>FROM:</b> <b>COUNSELOR:</b> <b>CASE #:</b> <b>STATUS:</b>	<b>Classes Needed</b>	<b>Classification use only:</b> ___ Wk Rel ___ AA ___ NA ___ PE ___ GED ___ ABE ___ SR ___ NPE OTHER:
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**Ledger:**  
**Wk Rel** = Work Release  
**SR** = Security Review  
**PE** = Pass Eligible

**GED** = General Education Development  
**AA** = Alcoholic Anonymous  
**NPE** = Not Pass Eligible

**ABE** = Adult Basic Education  
**NA** = Non-Alcoholic Anonymous  
**Others** = Specify in space provided