

MOVE IN

KENTUCKY SEX OFFENDER
REGISTRATION FORM

SON:

SID:

FBI:

Photo: Prints: DNA: SVP:

NAME AND GENERAL INFORMATION

Last Name: First Name: Middle Name:
Social Security #: Date of Birth: Sex: Race:
Height: Weight: Hair Color: Eye Color:

ALIAS NAME

Last Name: First Name: Middle Name:

SCARS, MARKS & TATTOOS

Category: Item/Location:

ADDRESS

PRIMARY ADDRESS

Street No: Street Name: City: State: Zip: County:
Phone: (next to Street Name)

PREVIOUS ADDRESS (Non-Kentucky Address)

Street No: Street Name: City: State: Zip:

RELEASE INFORMATION

On Supervised Release: Registration Type: Date Released: Maximum Date Released:

OFFENSE INFORMATION

Remarks Description of Crime:

KRS: KRS Description:
Counts: Enhancer: Offense Date: Conviction Date:
Place Of Crime: County:

VICTIM INFORMATION

Age: Sex: Relationship to Offender:

LICENSE/ID INFORMATION

License/ID #: Year: State:

I have been notified and understand that: 1. The above information is being sent to the Kentucky State Police in order to place me on the Sex Offender Registry. 2. I am required to notify the local Probation and Parole office prior to any change of residence addresses. 3. I must register in any state in which I relocate, have employment, am a student or carry on a vocation until the expiration of my registration period. 4. I will be required to periodically verify my residence addresses by completing and returning the address verification form that is sent by the Kentucky State Police. 5. I must return to the local probation and parole office not less than one (1) time every two (2) years in order for a new photograph of me to be obtained. 6. My failure to comply with any portion of this law is a **Class D felony for the first offense and a Class C felony for each subsequent offense**. 7. I will be notified by the Department of Kentucky State Police by mail once my duty to register as a sex offender in Kentucky has expired.

I understand that I have the right to request an administrative appeal of my lifetime registrant designation within sixty (60) days from my date of registration pursuant to Department of Corrections (DOC) Policy and Procedure 27-30-01, a copy of which has been provided to me.

Registrant Signature: Date Signed: _____

Authorizing Official Name (Please Print) Authorizing Official Signature Date Signed _____
PROBATION AND PAROLE OFFICER

Title Phone Number _____

Copy: Kentucky State Police (Attn: SOR) 1295 Louisville Road, Frankfort, Ky 40601
Copy: File
Copy: Offender

P226
Revised: 12/2017

KENTUCKY SEX OFFENDER REGISTRANT RESPONSIBILITIES

I, _____, Social Security Number _____, Date of Birth _____, have been informed that I am required to register with the Kentucky Sex Offender Registry pursuant to Kentucky Revised Statutes 17.500 - 17.540, and acknowledge the following by signing below:

I shall provide the Justice and Public Safety Cabinet with the following registrant information: name, (including any lawful name change together with the previous name), Social Security number, age, race, sex, date of birth, height, weight, hair and eye color, fingerprints, palm prints, DNA sample, a photograph, aliases used, residence, motor vehicle operator's license number as well as any other government-issued identification card numbers, name and address of any place where I am a student, a brief description of the crime or crimes committed, and any other information the Justice and Public Safety Cabinet determines, by administrative regulation, may be useful in the identification of registrants.

My registrant information, including my photograph, will be posted on a web site maintained by the Kentucky State Police, pursuant to KRS 17.580. This web site shall be available to the public. My registrant information shall be maintained on this web site for the duration of my registration.

If my residence address changes within in the same county, I must register the change of address with the local probation and parole office for the county where I live on or before the date of the change of address.

If I change my residence to a new county, I must notify my current local probation and parole office of the new residence address on or before the date of the change of address. I must also register with the appropriate local probation and parole office for my new county of residence no later than five (5) working days after the date of my change of address.

I must register my motor vehicle operator's license number or any other government-issued identification card number. If my motor vehicle operator's license number or any other government-issued identification card number changes, I shall register the change or addition no later than five (5) working days after the date of the change or the date of the addition, with the appropriate local probation and parole office in the county in which I reside.

If I committed my offense on or after July 12, 2006, I shall not reside within one thousand (1,000) feet of a high school, middle school, elementary school, preschool, publicly owned playground, or licensed day care facility. The measurement shall be taken in a straight line from the nearest property line of the school to the nearest property line of my place of residence.

I shall not be on the clearly defined grounds of a high school, middle school, elementary school, preschool, publicly owned playground, or licensed day care facility, except with the advance written permission of the school principal, the school board, the local legislative body with jurisdiction over the publicly owned playground, or the day care director that has been given after full disclosure of my status as a registrant, and all registrant information as required in KRS 17.500.

No registrant who is eighteen (18) years of age or older and has committed a criminal offense against a victim who is a minor shall have the same residence as a minor. A registrant who is eighteen (18) years of age or older and has committed a criminal offense against a victim who is a minor may have the same residence as a minor if the registrant is the spouse, parent, grandparent, stepparent, sibling, stepsibling, or court-appointed guardian of the minor, unless the spouse, child, grandchild, stepchild, sibling, stepsibling, or ward was a victim of the registrant. This subsection shall not operate retroactively and shall apply only to a registrant that committed a criminal offense against a victim who is a minor after July 14, 2018.

I shall not intentionally photograph, film, or video a minor through traditional or electronic means without the written consent of the minor's parent, legal custodian, or guardian unless I am the minor's parent, legal custodian, or guardian. The written consent required under KRS 17.546 shall state that I am required to register as a sex offender under Kentucky law.

I shall report the following to the local probation and parole office no less than twenty-one (21) days before traveling outside of the United States: My passport number and country of issue; the dates of departure, travel, and return; and the foreign countries, colonies, territories, or possessions I will visit. I shall register the following information with the appropriate local probation and parole office no later than five (5) working days after the date of my return from traveling outside of the United States: the date I departed, traveled, and returned, and the foreign countries, colonies, territories, or possessions that I visited.

If I move to another state, or obtain employment, attend school, or carry on a vocation in another state, I am subject to registration in that state according to the requirements of its statutes.

I am familiar with the provisions of KRS 17.500-540, KRS 17.545, and KRS 17.546, and understand that the provisions of these statutes may be located at <<http://www.lrc.ky.gov>>.

If the Justice and Public Safety Cabinet determines that I have failed to comply with any of the registration requirements, they shall notify the appropriate authorities for prosecution. I am aware that knowing violation of any of the provisions of the Sex Offender Registration Act or prior law is a Class D felony for the first offense and a Class C felony for each subsequent offense. I am further aware that knowingly providing false, misleading, or incomplete information is a Class D felony for the first offense and a Class C felony for each subsequent offense.

LIFETIME Registrant - I will be registered for the remainder of my life. The Kentucky Justice and Public Safety Cabinet will verify my addresses, motor vehicle operator's license numbers, and government issued identification card numbers at least once every ninety (90) days.

TWENTY-YEAR Registrant - I will be registered for twenty (20) years following discharge from confinement, or following the maximum discharge date on probation, shock probation, conditional discharge, parole, or other form of early release, whichever period is greater. The Kentucky Justice and Public Safety Cabinet shall verify my addresses, motor vehicle operator's license numbers, and government issued identification card numbers at least one (1) time every calendar year.

Inmate/Sex Offender Signature

Number

Date

PROBATION AND PAROLE OFFICER

Staff Witness

Title

Date