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| DIS8  **04/24** | Request for a review of an adjudication heard by a governor or director |  |  |
| Charge no. |  |
|  |

|  |
| --- |
| Name of establishment |
|  |

**Please read these notes before you complete this form.**

**1.** This form is for you to ask for a review (usually known as an appeal) of an adjudication decision, punishment and/or the imposed non-punitive compensation requirement amount in respect of an adjudication heard in front of a governor. It cannot be used for any other purpose – if you want a review of the punishment for an adjudication that was heard in front of an independent adjudicator, you must complete form IA4 and send it to the governor within 14 days of the end of your adjudication.

**2.** You must ask for a review of your adjudication heard by a governor no later than six weeks after the adjudication was completed.

**3.** Please write clearly.

**4.** Sign and date the form and place it in the box provided for complaints. Your request will be acknowledged.

**5.** The Prison Group Director will then review your adjudication. This form will be returned to you with a decision about your request.

**6.** You have the right to see the evidence considered by the Prison Group Director.

**7.** If you are not satisfied with the Prison Group Director’s decision you have the right to refer your adjudication to the Prisons and Probation Ombudsman.

**Your details** (use BLOCK CAPITALS)

|  |  |  |
| --- | --- | --- |
| Prisoner’s first name(s) |  | Prisoner’s surname |
|  |  |  |

|  |
| --- |
| Prisoner’s number |
|  |

**Your reason for wanting a review of your adjudication**

(please continue on a separate sheet if you need to)

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| --- |
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|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
|  |  |  |
|  |  |

**The Prison Group Director’s decision about your request for a review of your adjudication**

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|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
|  |  |  |
|  |  |

|  |  |  |
| --- | --- | --- |
| Name (BLOCK CAPITALS) |  | Position |
|  |  |  |

Say briefly what action was taken following the review

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| **This section is for official use only**   |  | | --- | | Serial number of review | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Sentenced to |  | Category |  | Status | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Release date |  | Ethnicity |  | Location | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Date received |  | Date acknowledged |  | Date returned to prisoner | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | | Outcome of review: |  | Rejected  Allowed | |