

1677 Old Hot Springs Rd., Ste. A
Carson City, Nevada 89706
<http://parole.nv.gov>
(775) 687-5049
Fax (775) 687-6736

CONNIE S. BISBEE, *Chairman*
TONY CORDA, *Member*
ADAM ENDEL, *Member*
SUSAN JACKSON, *Member*

DARLA FOLEY, *Executive Secretary*

STATE OF NEVADA
BRIAN SANDOVAL
Governor



4000 S. Eastern Ave., Ste.130
Las Vegas, Nevada 89119
<http://parole.nv.gov>
(702) 486-4370
Fax (702) 486-4376

CONNIE S. BISBEE, *Chairman*
ED GRAY, JR., *Member*
MICHAEL KEELER, *Member*
LUCILLE MONTERDE, *Member*

NEVADA BOARD OF PAROLE COMMISSIONERS

Instructions (Including Application to Parole Board)

1. Be sure you meet the requirements set forth in NRS 176.033 (2).
 2. Make application to the Board of Parole Commissioners (Board) requesting a modification of sentence.
 3. You may only make application to the Board if you meet the criteria established in NRS 176.033 (2). If your application is accepted, the Board will forward it to the Chief of the Division of Parole and Probation requesting a recommendation.
 4. If you have been convicted of a sex offense, you will need to obtain a psychosexual evaluation (cannot be over 6 months old) by a person professionally qualified to conduct such evaluations indicating the applicant is not likely to pose a threat to the safety of others if released from life parole. Petitioner must pay for the cost of the psychosexual evaluation.
- Section 6**
5. Upon receipt of your application and a favorable recommendation from the Chief of the Division, a hearing will be scheduled by the Board in compliance with NRS 213.130. If your request is denied, you may reapply to the Board at a future date.
 6. If a modification of sentence is recommended by the Board, a petition will be sent to the court of original jurisdiction.
 7. Upon receiving a positive recommendation from the Board, the court will determine if your original sentence will be modified.

STATE OF NEVADA
BOARD OF PAROLE COMMISSIONERS
Application for Modification of Sentence - Page 1 of 2
NRS 176.033 (2)

This application is designed for parolees currently being supervised by the Division of Parole and Probation for a sentence imposed by a Nevada Court.

Applications that are not complete may be rejected.

CONTACT INFORMATION

Applicant Name:	NDOC#:
Home Phone#:	Work Phone#:
Cell#:	
Present Address:	

SECTION 1

Please indicate your answer by checking the YES or NO box after each question

	YES	NO
Are you currently being supervised by Nevada Division of Parole and Probation?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever applied for a modification of parole? If YES, please indicate the date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you being supervised for a determinate term (you have an expiration date)? If you answered YES, go to Section 2 . If you answered NO, go to the next question.	<input type="checkbox"/>	<input type="checkbox"/>
Are you serving a Life sentence? If you answered yes, go to Section 3 .	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 2

YES NO

Please indicate the date you were granted parole to the street: _____	<input type="checkbox"/>	<input type="checkbox"/>
Has your parole, for the current sentence you are serving, ever been revoked? If yes, please indicate the date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you served one-half of the period of your parole from the date you were paroled to the date you will expire? After completing this question continue to Section 4 .	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3

YES NO

Please indicate the date you were granted parole to the street: _____	<input type="checkbox"/>	<input type="checkbox"/>
Has your parole, for the current sentence you are serving, ever been revoked? If yes, please indicate the date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you served at least 10 consecutive years on parole? If NO, please indicate the number of consecutive years served: _____ After completing this question continue to Section 4 .	<input type="checkbox"/>	<input type="checkbox"/>

Application for Modification of Sentence - Page 2 of 2

SECTION 4

List the sentence that you wish to be modified.

Conviction:

Judicial District Court (i.e., 8th JD, 2nd JD etc):

Sentence Date:

Term of Sentence: Min: _____ Max: _____

What is your projected sentence expiration date?

SECTION 5

Please list any prior felony convictions in this or any other state or jurisdiction.

Please indicate why your request should be considered by the Parole Board (you may use an additional sheet of paper if necessary).

Modification of Sentence

NRS 176.033 Sentence of imprisonment required or permitted by statute: Definite period for misdemeanor or gross misdemeanor; minimum and maximum term for felony unless definite term required by statute; restitution; modification of sentence.

1. If a sentence of imprisonment is required or permitted by statute, the court shall:
 - (a) If sentencing a person who has been found guilty of a misdemeanor or a gross misdemeanor, sentence the person to imprisonment for a definite period of time within the maximum limit or the minimum and maximum limits prescribed by the applicable statute, taking due account of the gravity of the particular offense and of the character of the individual defendant.
 - (b) If sentencing a person who has been found guilty of a felony, sentence the person to a minimum term and a maximum term of imprisonment, unless a definite term of imprisonment is required by statute.
 - (c) If restitution is appropriate, set an amount of restitution for each victim of the offense and for expenses related to extradition in accordance with NRS 179.225.
2. At any time after a prisoner has been released on parole and has served one-half of the period of his parole, or 10 consecutive years on parole in the case of a prisoner sentenced to life imprisonment, the State Board of Parole Commissioners, upon the recommendation of the division, may petition the court of original jurisdiction requesting a modification of sentence. The Board shall give notice of the petition and hearing thereon to the Attorney General or district attorney who had jurisdiction in the original proceedings. Upon hearing the recommendation of the State Board of Parole Commissioners and good cause appearing, the court may modify the original sentence by reducing the maximum term of imprisonment but shall not make the term less than the minimum term prescribed by the applicable penal statute.

(Added to NRS by 1967, 527; A 1973, 844; 1975, 652; 1977, 414; 1987, 395; 1989, 678; 1993, 934, 1512; 1995, 551, 1248)

SECTION 6

PETITION FOR RELEASE FROM LIFE PAROLE FOR SEX OFFENDERS

Certification by Licensed Psychosexual Evaluator

I, _____, certify I am licensed to conduct psychosexual evaluations pursuant to NRS 176.133.

Checkmark one or more the following boxes indicating applicable license:

- (a) A psychiatrist licensed to practice medicine in this State and certified by the American Board of Psychiatry and Neurology, Inc.;
- (b) A psychologist licensed to practice in this State;
- (c) A social worker holding a master's degree in social work and licensed in this State as a clinical social worker;
- (d) A registered nurse holding a master's degree in the field of psychiatric nursing and licensed to practice professional nursing in this State;
- (e) A marriage and family therapist licensed in this State pursuant to chapter 641A of NRS; or
- (f) A clinical professional counselor licensed in this State pursuant to chapter 641A of NRS.

I have evaluated petitioner/defendant named, _____, and have determined he/she does not pose a threat to the safety of others if released from lifetime supervision. A **certified copy** of the evaluation is attached to this certification.

Authorization by Petitioner/Defendant: hereby authorize the release of medical information related to the psychosexual evaluation herein and authorize distribution directly to the Nevada Board of Parole Commissioners. I hereby authorize, if necessary, this information to become public during my hearing for release from lifetime supervision.

Petitioner/defendant signature

Date

Practitioner, please review NRS 176.139 to ensure compliance: Applicable sections follow:

NRS 176.139 Presentence investigation and report: Psychosexual evaluation of certain sex offenders required; standards and methods for conducting evaluation; access to records; rights of confidentiality and privileges deemed waived; costs.

- . . .3) The person who conducts the psychosexual evaluation of the defendant must use diagnostic tools that are generally accepted as being within the standard of care for the evaluation of sex offenders, and the psychosexual evaluation of the defendant must include:
- (a) A comprehensive clinical interview with the defendant; and
 - (b) A review of all investigative reports relating to the defendant's sexual offense and all statements made by victims of that offense.
- 4) The psycho sexual evaluation of the defendant may include:
- (a) A review of records relating to previous criminal offenses committed by the defendant;
 - (b) A review of records relating to previous evaluations and treatment of the defendant;
 - (c) A review of the defendant's records from school;
 - (d) Interviews with the defendant's parents, the defendant's spouse or other persons who may be significantly involved with the defendant or who may have relevant information relating to the defendant's background; and
 - (e) The use of psychological testing, polygraphic examinations and arousal assessment.
- 5) The person who conducts the psychosexual evaluation of the defendant must be given access to all records of the defendant that are necessary to conduct the evaluation, and the defendant shall be deemed to have waived all rights of confidentiality and all privileges relating to those records for the limited purpose of the evaluation.
- 6) The person who conducts the psychosexual evaluation of the defendant shall:
- (a) Prepare a comprehensive written report of the results of the evaluation;
 - (b) Include in the report all information that is necessary to carry out the provisions of NRS 176A.110;

Licensed Professional: Please forward a certified copy of the evaluation to the Nevada Board of Parole Commissioners within 30 days of completion.