

Request for Inclusion or Revision to an Administrative Directive

Connecticut Department of Correction

CN 1301 REV 02/06/15

Administrative Directive Number: 9.6	Title: Inmate Administrative Rem	edies
☑ I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):		
In consultation with the State Attorney following revisions to A.D. 9.6 as a resu		
Remove Section 4, Subsection M: Appeal of Determination of Retroactive RREC credits		
Remove Section 17: Appeal of Determinat	ion of Retroactive RREC credits	
As a result of these changes, revise the	following form and attachment:	
Form CN 9602: Section 1C: Remove the	checkbox for Determination of Retroactive	RREC Credits
Attachment A: Appeal Procedure: Remove the section: Appeal of Determination of Retroactive RREC Credits		
See attached documents		
	ORIGINATOR	
Name:	Title:	Date: 12/16/15
Signature:	Facility/Unit:	
UNIT/DISTRICT/DIVISION RECOMMENDATIONS		
Approved Denied		
Unit Administrator's s	signature: 20 offer # Der-	~ Date: 13/14/15
District Administrator (only needed if originating from		Date: 12/16/13
Division Administrato	r's signature:	d Date: 12/13/15
COMMISSIONER'S DECISION		
This request is:	DENIED Effective date of request:	
The language/provisions of this inclusion/revision shall be effective as of: and subsequently added to the Administrative Directive at the next update.		
	d to the Administrative Directive prior to:	livo
i his inclusion/revision shall be adde	d immediately to the Administrative Direct	ive.
Commissioner's signature:		Date: 12 28/12