EARNED TIME CREDIT REPORT
DIRECT PLACEMENT OFFENDER

OFFENDER NAME	COMMUNITY CORRECTIONS FACILITY
SENTENCING COURT	CASE NUMBER

Time credit eligibility period _____/_____/_____ to _____/_____/_____ mm/dd/yy	(- _____) Time credits withdrawn (+ _____) Time credits restored (_____) Total time credits awarded for eligibility period

The offender terminated from this program on _____/_____/_____. As of that date, the offender would have gained a total of _____ days of time credits which vest only upon certification by the court.

☐ The offender was terminated for an escape or abscondment.

☐ The offender was **not** terminated for an escape or abscondment.

As required by law, I have verified the truth and accuracy of any time credit deductions for the eligibility period shown. CRS 18-1.3-301

/s/ _____, Program Administrator Dated: _____

"Any offender who escapes from a residential community corrections program or who absconds from a nonresidential community corrections program shall forfeit any time credit deductions earned…" CRS 18-1.3-301

☐ The Court certifies the time credits as set forth above.

☐ The Court does **not** certify the time credits as set forth above. Instead, the Court certifies _____days of time credits.

So ordered: _____, Dated: _____