

ORIGINAL COMMENCEMENT DATE
RENEWAL DATE

DEPRIVATION ORDER
 DEPRIVATION ORDER RENEWAL

INMATE'S NAME	
DIN#	CELL LOCATION

_____ Correctional Facility

In accordance with 7 NYCRR Section 305.2, you are being deprived of the following specific item(s), privilege(s) or service(s): _____
because it is determined that a threat to the safety or security of staff, inmates or State property exists and for the following specific reason(s): _____

Recommended by _____, Sergeant

Authorized by: _____ Date _____
Deputy Superintendent for Security (DSS)/Officer of the Day (O.D.) or other authorized staff

Notice to Inmate:

You may write to the Deputy Superintendent for Security or his/her designee to make a statement on the need for continuing this deprivation order.