D Client's Initials:	RAFT CLIENT SUPERVISION		
Agent Name:		Agency:	
CASE TYPE INFORMATION: The following questiestimates or other information that would be in Offender Case Status: 1. Juvenile 2. Adult			
Sex/Gender: 1. Male 2. Female 3. Non-binary			
Type of Supervision: 1. Probation 2. Supervised F	Release/Parole		
New or ongoing case? 1. New (first 30 days) 2. C	ngoing		
r case type information?? TYSex Offender 2. DWI 3. Administrative 4 violence 9. Drug specific 10. Traditional	. Inter-/Intra-state in 5. Inter-/li	ntra-state out	<mark>fic</mark> type 8. Domestic
Highest Offense Level: 1. Felony 2. Misdemo	eanor 3. Gross Misdemeanor		
Risk Level: 1. Low 2. Moderate 3. High 4. Ve			
Supervision level: 1. Administrative 2. Low 3. Medi	um 4. High 5. Enhanced 6. Pha	se I11. Phase V 12. Grad	uation? 13. Residential
Timimum contact standard: list options in surve	y/survey results		
Monitoring services (check all that apply):		onic monitoring/GPS	☐ None apply
Number of cases associated with sup			
AT END OF STUDY MONTH: Which of the following occurred during the stud □ Absconded □ Install/remove monitoring dev □ None apply		going) □ Violation □	l Revocation □ ATR
Reassessment completed during study month? 1	. No 2. Yes If yes, da	te reassessment complete	ed:
If yes, new supervision level following reassessn	nent : 1. Minimum 2. Mediur	n 3. Maximum 4.	. Enhanced
Supervisor Review: Work Met Standards: 1. Yo	es 2. No		
If no, why didn't the case meet standards? ☐ Number of contacts/other standards not met ☐ Activities are not reflective of the type of work ☐ Worker stopped tracking ☐ Not all work dor	associated with initial case clas ne during the month recorded		er:
CONTACT (ACTIVITY CODES			
CONTACT/ACTIVITY CODES Activity	Person Involved	Method	Agent's Location

Activ ity	P <mark>erson</mark> Involved	Method	Agent's Location
(select <mark>only</mark> one code)	(s <mark>elect</mark> up to three)	(select only one code)	(select only one code)
1. Contact preparation/scheduling	1. Client	1. Face-to-face	1. Office
2. Supervision contact	2. Collateral	2. Video conference	2. Client's home
3. Supervision contact with EBP applied	3. Supervisor	3. Phone/fax/email/mail	3. Jail/prison/facility
4. Documentation/case file updating/report writing	4. Other DOC/CPO/CCA staff	4. Computer/paperwork	4. Court
5. Interviewing/fact-finding/staffing	5. Victim	5. Other	5. Other
6. Service Referral/ <mark>Servic</mark> e follow-up	6. Other		
7. Assessments/reassessments	7. None (e.g. computer work)		
8. Custody/transport offender			
9. Monitoring equipment work			
10. Other (specify in notes)			

Date	Violation Work (√ = yes)	Activity Description			Minutes Spent		Notes	
MM/DD		Activity	Person Involved	Method	Agent's Location	Activity	Travel	(specify if activity code=10)

1	I			1		
<u>.</u> !	<u>I</u>	<u>I</u>	<u>I</u>	<u>. </u>		