

**Integrated Probation Registrant System (IPRS)
Probation Entry/Modification Form - Page 2**

- Entry: To add a new Probation case, this page must be submitted along with page 1.
- Modify: If modification includes a change to special conditions or sentence data, this page must be submitted.

Registration # _____

Client ID: NYSID Number: CJTN: ORI:

SENTENCE

- Local Jail
- Juvenile Facility Placement
- Probation
- Intermittent Imprisonment
- Fine

SPECIAL CONDITIONS

- | | |
|--|--|
| <input type="checkbox"/> Abstinence from Alcohol | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Abstinence from Drugs | <input type="checkbox"/> Ignition Interlock |
| <input type="checkbox"/> Alcohol Abuse Program | <input type="checkbox"/> Intensive Supervision Program |
| <input type="checkbox"/> Alcohol Evaluation | <input type="checkbox"/> Medical Treatment |
| <input type="checkbox"/> Alcohol Testing | <input type="checkbox"/> No Operator's License |
| <input type="checkbox"/> Attend School (includes working toward GED) | <input type="checkbox"/> Office of Children and Family Services |
| <input type="checkbox"/> Avoid Disreputable Persons | <input type="checkbox"/> Order of Protection |
| <input type="checkbox"/> Avoid Injurious Habits | <input type="checkbox"/> Probation with Domicile Restriction |
| <input type="checkbox"/> Avoid Unlawful Places | <input type="checkbox"/> Probation with Fine |
| <input type="checkbox"/> Bond or Security | <input type="checkbox"/> Probation with Jail |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Psychiatric Treatment |
| <input type="checkbox"/> Day Reporting | <input type="checkbox"/> Rehabilitative Program (including counseling) |
| <input type="checkbox"/> Drug Abuse Program | <input type="checkbox"/> Reside with Parents or Foster Home |
| <input type="checkbox"/> Drug Evaluation | <input type="checkbox"/> Restitution |
| <input type="checkbox"/> Drug Testing | <input type="checkbox"/> Support Dependents |
| <input type="checkbox"/> Electronic Monitoring | <input type="checkbox"/> Training |
| | <input type="checkbox"/> Other |