

Name: _____

County: Winona

Court File #: _____

**STATE OF MINNESOTA
DEPARTMENT OF CORRECTIONS**

1450 Energy Park Drive

Suite 200

St. Paul, MN 55108

(651)361-7200

PRIVACY ACT STATEMENT

The Minnesota Government Data Practices Act protects your right to privacy. Minn. Stat. S 13.04, subd. 2 requires that when you are requested to provide private information on yourself, you have the right to be informed of:

1. The purpose and intended use of that data.
2. Whether you may refuse or are legally required to supply the data.
3. The consequence for refusing to supply the data.
4. The identity of others who may receive this data.

The District Court ordered the Department of Corrections to prepare the following reports concerning you:

- A. Pre-Sentence Investigation (Background report to assist the court in sentencing).
- B. Post-Sentence Investigation (Background report to the court after sentencing).
- C. Pre-Disposition (Background report to assist the court in determining juvenile dispositions).
- D. Bond Study (Information provided to the court to assist in making release conditions and setting the bail amount).
- E. Supervised Release / Probation / Parole / Diversion
- F. Other (Provide brief description). Adult Pre-trial Monitoring Program

The data collected will be provided to the court and retained in your Department of Corrections file. The information may be provided to other criminal justice agencies as provided by law for the following purposes:

1. Probation, correctional institution and release planning.
2. Case referral, evaluation, placement or treatment.
3. Collection of statistical or research data.

The information you provide will be used as described above and may be shared with any other person or entity authorized by state or federal law or court order to access the data. You are legally required to supply the requested information. If you fail to do so, the court will be informed and further court action will be requested.

I have been informed of and understand these rights. I have been provided a copy of this statement, and I understand that a copy will be placed in my Department of Corrections file.

(Date)

(Signature)

(Pre-trial Agent's Signature)

