SEX/KIDNAPPING OFFENDER REGISTRATION

Administrative relief of the duty to register

Insert your agency logo and contact information here.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Registrant’s full name: | | |  | | |
| DOB: | |  | | SID Number: |  |
|  |  | | | | |
|  | The above offender has spent 10 consecutive years in the community without being convicted of a disqualifying offense, pursuant to RCW 9A.44.142. | | | | |
|  | The above offender has spent 15 consecutive years in the community without being convicted of a disqualifying offense, pursuant to RCW 9A.44.142. | | | | |
| **The following have been checked to verify eligibility:** | | | | | |
|  | Washington State Crime Information Center (WACIC) | | | | |
|  | Washington State Identification and Criminal History Section (WASIS) | | | | |
|  | National Crime Information Center (NCIC) | | | | |
|  | Superior County Management Information Systems (SCOMIS) | | | | |
|  | Judicial Information Systems (JIS) (Formerly DISCIS) | | | | |
|  | Felony Offender Reporting Systems (FORS) | | | | |
|  | Want and Warrants | | | | |
|  | Other | | | | |

|  |  |
| --- | --- |
| Date Relieved of Duty: |  |
| Signature of Official: |  |
| Printed Name of Official: |  |
| Agency Name: |  |
| Date: |  |

I, , understand that I have been administratively removed from my duty to register as a sex offender in the State of Washington. I further understand that this relief of duty to register in Washington does not relieve me of the duty to register in other states, tribal or foreign jurisdictions I may resided in or visit. It is my responsibility to check with every jurisdiction where I reside or visit to ensure I am complying with the sex offender registration laws.

|  |  |
| --- | --- |
| Registrant’s Signature | |
|  |  |
| Registrant’s Printed Name | Date: |