



Humboldt County Correctional Facility

Detention / O.R. Pre-Release Verification

Inmate: _____

Arrest Time: _____

Booking: _____

Release Time: _____

Processing Officer's Observations:

Does the subject, who is eligible for release, display any of the following symptoms indicative of being under the influence of either drugs and/or alcohol?

- | | | |
|--------------------------------------|-----|----|
| 1. Slurred Speech | Yes | No |
| 2. Unsteady Gait | Yes | No |
| 3. Rapid Speech | Yes | No |
| 4. Disorientation to time and place | Yes | No |
| 5. Slow to respond/Impaired Reflexes | Yes | No |

6. Does the subject, who is eligible for release, meet the commitment criteria pursuant to W&I 5150? (Is the person a danger to him or herself, a danger to others, and/or gravely disabled?)

Yes No

7. Has the subject been offered the opportunity to speak with a mental health professional, to include a courtesy ride to Semper Virens?

Yes No

Inmate Release Questions:

Has the subject been offered the following options to help ensure a safe, after hours release?

- | | | |
|---|-----|----|
| 1. Contact a friend/relative by phone | Yes | No |
| 2. Contact a cab company for a ride | Yes | No |
| 3. Offered the opportunity to stay until daylight | Yes | No |

By signing below you are verifying you were read and offered the 3 release options listed above. These options are provided by the Sheriff to help ensure your safety upon release.

Inmate's Signature: _____

Evaluating Officer's Signature: _____

- Inmate refused to sign. Officer's Signature: _____
- Does not apply. Inmate was not released after hours.
- Subject chose to remain in custody until daylight.