

NOTICE OF PETITION FOR TRANSFER AND ORDER TO PLACE OF DETENTION G.L. c. 123, § 18(a½)		CRIMINAL DOCKET NO.		Massachusetts Trial Court	
		MENTAL HEALTH DOCKET NO.			
PRISONER LAST NAME		PRISONER FIRST NAME		DOB	
				GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
SSN (LAST 4 DIGITS)					
PETITIONER <input type="checkbox"/> Prisoner <input type="checkbox"/> Prisoner's Legal Representative <input type="checkbox"/> Staff Person at Place of Detention, at Prisoner's Request		PETITIONER'S NAME AND TITLE <i>(if Petitioner is not Prisoner)</i>			
PLACE OF DETENTION		PETITIONER'S PHONE NUMBER OR CONTACT INFORMATION <i>(if Petitioner is not Prisoner)</i>			
TO THE PERSON IN CHARGE OF THE PLACE OF DETENTION:					
The Petitioner has filed the attached Petition with this Court to transfer the Prisoner pursuant to G.L. c. 123, § 18(a½). The Court ORDERS that the place of detention provide the information identified below (if not previously provided with the Petition) within 3 business days to the Clerk Magistrate at the above-named Court.					
DATE		SIGNATURE OF JUDGE			
INFORMATION TO BE PROVIDED					
• Identify <u>all</u> criminal cases on which the Prisoner is being held and whether as a pretrial detainee or serving a sentence <i>(use space on next page or attach additional pages as needed)</i> :					
_____ CRIMINAL DOCKET NO. <input type="checkbox"/> Pretrial Detainee <input type="checkbox"/> Serving Sentence		_____ CRIMINAL DOCKET NO. <input type="checkbox"/> Pretrial Detainee <input type="checkbox"/> Serving Sentence		_____ CRIMINAL DOCKET NO. <input type="checkbox"/> Pretrial Detainee <input type="checkbox"/> Serving Sentence	
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• Identify the date and outcome of any prior petitions under G.L. c. 123, § 18(a½), if known <i>(use space on next page if needed)</i> :					
• Attach all holding documents (e.g., all mittimus) under which the Prisoner is being detained.					
• If applicable, the Prisoner has been on mental health watch status, as defined in G.L. c. 123, § 18(a½)(1) for _____ length of time <i>(attach relevant supporting documents)</i> .					
• Attach clinical evaluations, medical records, examination reports, and other relevant documents (for example, disciplinary reports or reports of past incidents of self-harm or harm to others) for the following time period: _____ dates					
• Additional information relevant to the Petition is provided below <i>(use additional space on next page or attach documents as necessary)</i> :					
<input type="checkbox"/> Additional information or documents relevant to the petition will be provided within 3 business days.					
<input type="checkbox"/> More than 3 business days are required to provide additional information or documents relative to the petition. The reason more time is requested, and the amount of time requested to provide the material is <i>(use space below, on next page, or attach additional documents as necessary)</i> :					
DATE		NAME/TITLE OF PERSON COMPLETING FORM AT PLACE OF DETENTION		SIGNATURE OF PERSON COMPLETING FORM	

Additional Information Provided: