

**Notice of Duties to Enroll as a Violent Offender (ORC 2903.41, et seq.)**

DRC# \_\_\_\_\_ VOD# \_\_\_\_\_ SSN \_\_\_\_\_ BCI# \_\_\_\_\_  
County of Conviction \_\_\_\_\_ Case# \_\_\_\_\_  
Conviction ORC#(s) \_\_\_\_\_ DL/State ID \_\_\_\_\_  
Name \_\_\_\_\_  
(Last) (First) (Middle)  
Expected Residence Address \_\_\_\_\_  
(Street) (City)  
(State) (Zip) (Phone)

- 1. You have been convicted of or pleaded guilty to a qualifying violent offender offense as defined in ORC 2903.41.
- 2. You are required to enroll, in person, with the sheriff of the county in which you establish residency within 10 days of coming into that county or if occupying a dwelling for more than 3 days in the county.
- 3. You are required to provide the sheriff certain information including:
  - a. Your social security number, full name, and any alias you use.
  - b. Your residence address.
  - c. Information regarding the offense of which you were convicted or pleaded guilty.
  - d. A description of any scars, tattoos, or other distinguishing marks on your person.
  - e. The name and address of any place where you are employed or attend school.
  - f. Any driver's license number, or commercial driver's license number, or state identification card number issued to you.
  - g. The license plate number of each vehicle owned or operated by you, or registered in your name. The vehicle identification number and a description of the vehicle must also be provided to the sheriff.
- 4. You are required to provide the sheriff fingerprints and palm prints. The sheriff will also obtain a photograph of you at the time of enrollment.
- 5. After the date of initial enrollment, you are required to reenroll annually. You must update and/or amend any of the information described above that has changed and provide any additional information requested at the county sheriff's office within 10 days of the anniversary of the calendar date on which you initially enrolled.
- 6. If you change your residence address, you shall provide written notice of that change to the sheriff with whom you most recently enrolled, and to the sheriff in the county in which you intend to reside.

YOU ARE REQUIRED TO COMPLY WITH ALL OF THE ABOVE-DESCRIBED REQUIREMENTS FOR A PERIOD OF 10 YEARS, UNLESS YOUR SENTENCING COURT DETERMINES OTHERWISE.

- 7. Since your expected residence address is located in \_\_\_\_\_ County, you shall enroll in person no later than \_\_\_\_\_ (10 days after release or sentencing if you were not subject to incarceration) with that county sheriff's office located at:

\_\_\_\_\_  
(Street Address) (City/State) (Zip)

- 8. Failure to enroll or failure to verify residence at the specified times will result in criminal prosecution.
- 9. I acknowledge that the above requirements have been explained to me. I understand the requirements and that I must abide by all of the provisions of the Ohio Revised Code Chapter Sections 2903.41 through 2903.44.

\_\_\_\_\_  
Offender's Signature Date

- 10. I certify that I specifically informed the offender of their duties as set forth above and they indicated to me an \_\_\_\_\_ understanding of those duties.

\_\_\_\_\_  
Signature of Official Date

\_\_\_\_\_  
Print Official's Name Print Title & Agency