



Division of Criminal Justice (DCJ) - Office of Adult & Juvenile Justice Assistance (OJJDP)

Certification of Non-Secure Facility Classification

To ensure proper classification of facilities for the purpose of compliance with the Juvenile Justice and Delinquency Prevention Act (JJDP), the Division of Criminal Justice (DCJ) requests your agency complete this form. If your agency operates more than one facility, please complete a separate form for each applicable, non-secure facility. Please submit your completed form to cdps_dcj_oajjacompliance@state.co.us.

Agency: _____ County: _____

Contact Person and Title: _____

Contact Phone: _____ Contact Email: _____

Agency Address: _____

Facility Name: _____

Mark all items below as True (T), False (F) or Not Applicable (NA) to determine classification of the facility listed above.

____ Within this facility there are no holding cells.

____ Within this facility there are holding cells, but they are not used to detain or confine juveniles or adults for any reason. Our agency has either issued a memo that the cells will not be used, or has written policies and procedures that contain this directive.

____ There is an interview room that does not lock which we use for victim interviews and/or suspect interrogations.

____ The interview room has no locks on the door and is not used as secure holding for anyone this agency takes into custody.

____ The interview room has a lock on the door but no officer can lock it (for example, they don't have keys).

____ The interview room has a lock on the door but the lock is only operational from the inside, therefore, the suspect or victim can lock themselves in but officers cannot lock the room from the outside.

____ There are no cuffing rings, cuffing benches or other stationary objects that officers use to cuff people to prevent them from leaving the building or room.

____ Included in our agency's written policies and procedures are directives that suspects will not be cuffed to a stationary object within the facility.

CERTIFICATION: This form must be signed by someone with authority within your agency, and in signing this form, he or she is certifying the accuracy of the information. If any of the above information changes, contact the DCJ Compliance Monitor (Mona Barnes – monal.barnes@state.co.us) as soon as possible to review the status of the facility's classification.

Signing Authority's Name

Signing Authorities Title

Date