SUPERVISING AGENCY *(Name and address)*:	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. *(Optional)*: EMAIL ADDRESS *(Optional)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
IN THE MATTER OF *(name of supervised person)*: Date of birth:	
PETITION FOR REVOCATION q **PAROLE (Pen. Code, §§ 3000.08, 1203.2)** q **PRCS (Pen. Code, §§ 3455, 1203.2)** q **PROBATION (Pen. Code, § 1203.2)** q **MANDATORY SUPERVISION (Pen. Code, §§ 1170(h)(5)(B), 1203.2)**	SUPERVISING AGENCY NUMBER: COURT CASE NUMBER:

INSTRUCTIONS

- *Before filing this form, petitioner should consult local rules and court staff to schedule the hearing in item 1.*
- *Petitioner must note whether the petition applies to a parole (beginning July 1, 2013) or postrelease community supervision matter by marking the appropriate check box above.*

1. **HEARING INFORMATION:** A hearing on this petition for revocation has been scheduled as follows:
   Date: Time: Dept.:
   Location *(if different than court address above)*:
   If an interpreter is needed, please specify the language:

2. **CUSTODY STATUS** *(Select one)*: q not in custody q in custody *(specify location)*:
   Booking number *(if any)*:

3. **CONVICTION INFORMATION:**
   The supervised person was originally convicted of the following offenses:

   on *(date)*: in case numbers *(specify)*:
   in county of *(specify)*: and sentenced to *(specify sentence)*:

4. **SUPERVISION INFORMATION:** The supervised person was released on supervision on *(specify date)*:
   Name of current supervising agent or officer:
   Supervision is scheduled to expire on (i.e., the controlling discharge date is) *(date)*:

5. **SPECIFIC TERMS AND CONDITIONS:** Petitioner alleges that the supervised person has violated the following terms and conditions of supervision *(if more space is needed, please use* Attachment to Judicial Council Form *(MC-025))*:

6. **SUMMARY:** The supervising agency established probable cause for the alleged violation on *(date)*:
   The circumstances of the alleged violation are *(if more space is needed, please use* Attachment to Judicial Council Form *(MC-025))*:

7. **SPECIAL PAROLE STATUS** *(check this box **only if** the supervised person is subject to parole under Penal Code sections 3000(b)(4) or 3000.1)*:
   q The supervised person is on parole under Penal Code sections 3000(b)(4) or 3000.1. If the court determines that the person has violated parole, the court is required to remand the person to the custody of CDCR for future parole consideration. (Pen. Code, § 3000.08(h).)

I declare under penalty of perjury and to the best of my information and belief that the foregoing is true and correct.

Date: _____ By _____

NAME AND TITLE OF PETITIONER SIGNATURE OF PETITIONER