

MARYLAND SENTENCING GUIDELINES WORKSHEET				OFFENDER NAME - Last, First, Middle				SID #		SEX ___M___F		BIRTHDATE 		JURISDICTION			
PSI ___ Yes ___ No		DATE OF OFFENSE 		DATE OF SENTENCING 		DISPOSITION TYPE ___ MSCSP binding plea agreement ___ Other plea agreement ___ Plea, no agreement ___ Court trial ___ Jury trial		MODIFICATION TO COV SENTENCES (If applicable) ___ Per MD Rule 3-345 ___ HG, § 8-507 Order ___ Three-Judge Panel Review		REPRESENTATION ___ Private ___ Public defender ___ Court appointed ___ Self		ETHNICITY Hispanic/Latino origin ___ Yes ___ No ___ Unknown		RACE (Select all that apply) ___ American Indian or Alaska Native ___ Black or African American ___ White ___ Other ___ Asian ___ Native Hawaiian or other Pacific Islander ___ Unknown			
AT THIS SENTENCING NUMBER OF:		OFFENSES 		CRIMINAL EVENTS 		WORKSHEET # _____ OF CRIMINAL EVENT # _____											
OFFENSE TITLE						I-VII		CJIS CODE		MD CODE, ART, & SECTION		STAT. MAX		MIN TERM		CASE #	
1st Offense																	
2nd Offense																	
3rd Offense																	
OFFENSE SCORE(S) — Offense Against a Person Only						OFFENDER SCORE		GUIDELINES RANGE		ACTUAL SENTENCE							
1st Off 2nd Off 3rd Off A. Seriousness Category 1 1 1 = V - VII 3 3 3 = IV 5 5 5 = III 8 8 8 = II 10 10 10 = I						A. Relationship to CJS When Instant Offense Occurred 0 = None or pending cases 1 = Court or other criminal justice supervision		1st Offense _____ _____ _____ TO _____		1st Offense For theft, fraud, and related crimes, please indicate: ☐ Economic Loss \$ _____ ; ☐ Unknown Amount _____ Restitution Proven _____ Yes _____ No							
1st Off 2nd Off 3rd Off B. Victim Injury 0 0 0 = No/minor injury 1 1 1 = Non-permanent injury 2 2 2 = Permanent injury or death						B. Juvenile Delinquency 0 = 23 years or older or 0 findings of a delinquent act w/in 5 years of the date of the most recent offense 1 = Under 23 years and: 1 or 2 findings of a delinquent act w/in 5 years of the date of the most recent instant offense 2 = Under 23 years and: 3 or more findings of a delinquent act w/in 5 years of the date of the most recent instant offense		2nd Offense _____ _____ _____ TO _____		2nd Offense For theft, fraud, and related crimes, please indicate: ☐ Economic Loss \$ _____ ; ☐ Unknown Amount _____ Restitution Proven _____ Yes _____ No							
1st Off 2nd Off 3rd Off C. Weapon Presence 0 0 0 = No weapon 1 1 1 = Weapon other than firearm 2 2 2 = Firearm or explosive						C. Prior Adult Criminal Record 0 = None 3 = Moderate 1 = Minor 5 = Major		3rd Offense _____ _____ _____ TO _____		3rd Offense For theft, fraud, and related crimes, please indicate: ☐ Economic Loss \$ _____ ; ☐ Unknown Amount _____ Restitution Proven _____ Yes _____ No							
1st Off 2nd Off 3rd Off D. Special Victim Vulnerability 0 0 0 = No 1 1 1 = Yes						D. Prior Adult Parole/Prob Violation 0 = No 1 = Yes				Additional Sentence Information Probation _____ Community Service _____ Fine \$ _____ Was the offender sentenced to a Corrections Option under Commission criteria? _____ Yes _____ No If yes, select all that apply: ☐ Drug court ☐ HG, § 8-507 order ☐ Home detention ☐ Suspended sentence per CR, § 5-601(e) ☐ Inpatient substance abuse treatment ☐ Work release ☐ Inpatient mental health treatment ☐ Weekend (or other discontinuous) incarceration ☐ Other problem solving court (specify): _____							
_____ OFFENSE SCORE(S)						_____ OFFENDER SCORE(S)		Overall Guidelines Range Multiple Counts Only		Was the offender sentenced to some other alternative to incarceration? _____ Yes _____ No If yes, select all that apply: ☐ Outpatient substance abuse treatment ☐ Outpatient mental health treatment ☐ Other (explain): _____							
VICTIM INFORMATION						REASONS FOR GUIDELINES DEPARTURE				Additional Information or Institutional/Parole Recommendation							
Victim _____ Yes _____ No Victim present _____ Yes _____ No Victim impact statement _____ Yes _____ No No contact ordered _____ Yes _____ No						Departure Code 10 or 19 (Please Explain): 		_____ _____ _____ TO _____		Worksheet Completed By _____ Title _____ Sentencing Judge (Please Print) _____ Sentencing Judge's Signature _____							
DEPARTURE _____ Yes _____ No										Parole Notification _____ Yes _____ No							