





PEER JURY PROGRAM OFFENDER PERFORMANCE RELEASE ____ CASE NO. _____ MUST RETURN TO THE PEER JURY ON PLEASE COMPLETE AND HAVE THE OFFENDER RETURN THIS FORM ON THEIR NEXT PEER JURY APPEARANCE DATE. ADDRESS______ NAME HAS COMPLETED _____OF___HOURS. IF ALL OF THE ASSIGNED HOURS HAVE NOT BEEN COMPLETED, PLEASE INDICATE THE REASON. PLEASE CHECK THE APPROPRIATE BOX FOR EACH CATEGORY. ABOVE AVERAGE AVERAGE BELOW AVERAGE COOPERATION COURTESY **DILIGENCE PUNCTUALITY** ABILITY TO FOLLOW INSTRUCTIONS **ATTITUDE** WOULD YOU RECOMMEND THIS PERSON AS A POTENTIAL PEER JUROR? COMMENTS ☐ NO ☐ YES SIGNATURE DATE **AGENCY**

CPD-24.465 (Rev. 4/14)

Emergency and TTY 9-1-1 - Non Emergency and TTY: (within City limits) 3-1-1 - Non-Emergency and TTY: (outside City limits) (312) 746-6000 E-mail: clearpath@chicagopolice.org - Website: www.chicagopolice.org

IF THERE ARE ANY PROBLEMS, PLEASE CONTACT THE DISTRICT PEER JURY LIAISON OFFICER AT: