IOWA DEPARTMENT OF CORRECTIONS

CHAPLAIN/DESIGNEE INFORMAL RESOLUTION REPORT

Offender Name: ________________________ Offender Number: _______________

Institution: ___________________________________________________________

Religious Affiliation: __________________________________________________

Date Offender attempted Informal Resolution: ______________

Please describe the Offender’s religious concerns and steps taken to resolve the problem:

What resolution did you suggest to the Offender?

From your perspective, why was this informational resolution attempt not successful?

Signed: ________________________________ Date: ______________