



## Oregon Board of Parole and Post-Prison Supervision

<b>Title: Offenders as Informants</b>	<b>Policy:</b>
<b>Effective Date: 12/21/10</b>	<b>Supersedes: 9/27/99</b>
<b>Signature:</b> 	<b>Attachments: Request Form</b>

### **I. PURPOSE**

To establish policy and procedures governing the use of offenders as confidential reliable informants.

### **II. DEFINITIONS**

- A. Offender: A person who is serving a period of parole or post-prison supervision under the authority of the Oregon Board of Parole and Post-Prison Supervision.
- B. Informant: A person who supplies information and data to a law enforcement agency in a confidential manner related to criminal activity.
- C. Command Staff: Management position within a law enforcement agency responsible for making policy and operational decisions.
- D. Community Corrections Director: The department head or administrator responsible for overseeing the supervision of parole and post-prison offenders within their jurisdiction.

### **III. POLICY:**

Under ordinary circumstances the Board of Parole and Post-Prison Supervision will not approve requests to allow offenders on parole or post-prison supervision to act as informants for law enforcement agencies. There are circumstances, however, where the Board may authorize such activity if the situation is important enough to justify placing the offender in association with criminal activity.

The Board will consider authorizing an offender on parole or post-prison supervision to act as an informant for law enforcement agencies if the request meets the following criteria:

- ◇ The requesting law enforcement agent is of command staff rank or his/her designee; and
- ◇ The request has been approved by the Community Corrections Director.

If the Board approves a request, the offender is still subject to the imposed conditions of supervision and the Board is not subject to any agreement for leniency that may be made by the offender with other criminal justice agencies.

Attached to this policy is a model form that requesting law enforcement agencies may use.

**Board of Parole & Post-Prison Supervision  
Confidential Informant Request Form**

Offender Name:

SID:

Supervising Officer:

County of Supervision:

**Effective Period Begin:**

**End:**

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**Supervision Information**

Offense (list all):

Status (Probation/Parole/PPS):

Expiration Date:

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**Comments:**

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Requesting Agency Signature

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Title

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Community Corrections Signature

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Title

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Board Member Signature

**Approved ( )**

**Denied ( )**

**Board Notes:**

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