

# Rape Sentencing Guidelines Cover Sheet

Complete this form ONLY for applicable felonies sentenced on or after July 1, 2017.

Scheduled Sentencing Date:

## ◆ OFFENDER

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Suffix \_\_\_\_\_

Date of Birth:  /  /

Social Security Number:

CCRE:  V  A  CORIS Offender ID:  PSI #:

## ◆ COURT

Judicial Circuit  City/County \_\_\_\_\_ FIPS Code

Sentencing Judge's Name \_\_\_\_\_

Preparer Name \_\_\_\_\_  Commonwealth's Attorney  Probation Officer

Prosecuting Commonwealth's Attorney \_\_\_\_\_ Defense Attorney \_\_\_\_\_

## ◆ CONVICTIONS

Offense	Counts	VCC	Offense Date
Primary Offense			Month Day Year
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional Offenses			
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Offense Code Section § \_\_\_\_\_ Docket Number \_\_\_\_\_

## ◆ METHOD OF ADJUDICATION

- Jury Trial Sentence Set by Jury:  Years  Months  Days  Life  Juvenile  Fine Only
- Bench Trial  Guilty Plea  Alford Plea/Nolo contendere

## ◆ SENTENCING GUIDELINES RECOMMENDATIONS

### Section B

- Probation/No Incarceration
- Incarceration 1 Day to 3 Months
- Incarceration 3 to 6 Months
- Mandatory Minimum \_\_\_\_\_

### Section C

- Incarceration (Enter Midpoint and Range Below)

Range Midpoint  Years  Months  Days

Sentence Range  Years  Months  Days TO  Years  Months  Days

- Recommendation Adjusted for Mandatory Minimum

- Non Guidelines Offense  
*(Primary offense is a non guidelines offense)*

### Modifications Based on Risk Assessment

The upper end of the sentencing range can be adjusted based on the risk assessment level.

Characteristics of the offender and the circumstances of the offense may have correlated with a significant risk of recidivism among other sex offenders. If so, the upper end of the recommended sentence range can be increased by:

- Check one
- 300% - Level 1
  - 100% - Level 2
  - 50% - Level 3
  - No Adjustment

### Adjusted High End

# ◆ Final Disposition Fill In After Sentence Has Been Pronounced

## ◆ SENTENCE \_\_\_\_\_

Total Time Imposed Before Suspension .....  Life Sentence + 

--	--	--

--	--

--	--	--	--

Total Effective Time to Serve .....  Life Sentence + 

--	--	--

--	--

--	--	--	--

Sentenced to Time Served

Post Release

Post Release Term § 18.2-10 ..... 

--	--	--

--	--

--	--	--	--

Post Release Supervision Period § 19.2-295.2(A)..... 

--	--	--

--	--

--	--	--	--

Probation Period (Supervised) § 19.2-303 .....  Indefinite 

--	--	--

--	--

--	--	--	--

Good Behavior Period \_\_\_\_\_  
Years                      Months                      Days

*Check all that apply*

- Incarceration Sentence to Run Concurrently With Another Sentencing Event
- Written Plea Agreement Accepted = Rule 3A:8(c)(1) (A) or (C)
- Plea and Recommendation Accepted = Rule 3A:8(c)(1)(B)
- Oral Sentence Recommendation Accepted
- Restitution \$ \_\_\_\_\_  Fine \$ \_\_\_\_\_

### Other Sentencing Programs (check all that apply)

- |  |   |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Day Reporting</li> <li><input type="checkbox"/> Detention Center Incarceration</li> <li><input type="checkbox"/> Diversion Center Incarceration</li> <li><input type="checkbox"/> Electronic Monitoring</li> <li><input type="checkbox"/> § 18.2-251/§ 18.2-258.1</li> <li><input type="checkbox"/> Substance Abuse Treatment</li> <li><input type="checkbox"/> Intensive Probation</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Community-Based Program _____</li> <li><input type="checkbox"/> <b>CCAP</b> Detention/Diversion Center Incarceration, 22-28 weeks</li> <li><input type="checkbox"/> <b>CCAP</b> Detention/Diversion Center Incarceration, 42-48 weeks</li> <li><input type="checkbox"/> Drug Court</li> <li><input type="checkbox"/> Youthful Offender <i>(Enter 4 yrs. to serve)</i> <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table><br/><small>Office Use Only</small></li> <li><input type="checkbox"/> <b>DJJ</b> Commitment <input type="checkbox"/> Indeterminate <input type="checkbox"/> Determinate</li> <li><input type="checkbox"/> Other _____</li> </ul> |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |

Office Use Only

Other	CBP

## ◆ REASON FOR DEPARTURE AND/OR MODIFICATION OF JURY SENTENCE

Must be completed pursuant to § 19.2-298.01(B) and/or § 19.2-295(B) / § 19.2-303

Office Use Only

--	--	--

---



---



---



---



---

## ◆ SENTENCING DATE

--	--

 . 

--	--

 . 

--	--	--

Month                      Day                      Year

\_\_\_\_\_  
*Judge's Signature*

## ◆ ATTACH COURT ORDER AND MAIL Pursuant to § 19.2-298.01(E) \_\_\_\_\_

After sentencing, send to:

**Virginia Criminal Sentencing Commission • 100 North Ninth Street • Fifth Floor • Richmond, Virginia 23219**

Office Use Only

--	--	--

# Rape Section A

Offender Name: \_\_\_\_\_

◆ **Offender's Age at Time of Offense** \_\_\_\_\_

Younger than 35 years .....	12	↓
35 to 46 years .....	4	
Older than 46 years .....	0	

◆ **Less than 9th Grade Education (by conviction date)** \_\_\_\_\_ If YES, add 4 → 0

◆ **Not Regularly Employed (during 2 years prior to arrest date)** \_\_\_\_\_ If YES, add 5 → 0

◆ **Offender's Relationship with Victim** \_\_\_\_\_

Victim Under Age 10	Relative .....	0	↓
	Known to victim (not relative or step-parent) .....	4	
	Stranger .....	4	
	Step-parent .....	9	
Victim Age 10 or more	Relative .....	2	
	Known to victim (not relative or step-parent) .....	3	0
	Stranger .....	8	
	Step-parent .....	2	

◆ **Location of Offense** \_\_\_\_\_

Place of employment .....	0	↓	
Shared victim/offender residence .....	3		
Outdoors .....	3		
Motor Vehicle .....	4		
Victim's residence (not offender's) .....	5		
Offender's residence or other residence .....	9		
Location other than listed .....	3		0

◆ **Prior Adult Felony/Misdemeanor Arrests for Crimes Against a Person** \_\_\_\_\_

Number: 0 Felonies	1 - 3 Misdemeanors .....	1	↓
	4+ Misdemeanors .....	8	
1 Felony	0 - 2 Misdemeanors .....	5	
	3+ Misdemeanors .....	8	
2+ Felonies	0 - 3 Misdemeanors .....	8	
	4+ Misdemeanors .....	15	

◆ **Prior Incarcerations/Commitments** \_\_\_\_\_ If YES, add 3 → 0

◆ **Prior Treatment** \_\_\_\_\_

Prior mental health commitment .....	0	↓
Prior mental health treatment .....	2	
Prior alcohol or drug treatment .....	3	
No prior treatment .....	4	

**Risk Score** \_\_\_\_\_ →

- Risk Level**  
(Risk Score)
- 44 or more ..... Level 1
  - 34 - 43 ..... Level 2
  - 28 - 33 ..... Level 3
  - up to 27 ..... No Adjustment

Go to **Section C**

# Rape Section C

Offender Name: \_\_\_\_\_

**There is no Section B for this offense.**

**Primary Offense** \_\_\_\_\_

— Prior Record Classification —  
 Category I     Category II     Other  
(scores for attempted/conspired offenses are in parentheses)

<b>A.</b> Attempted or conspired forcible rape, forcible sodomy or object sexual penetration			
1 count .....	(60)	(30)	(15)
<b>B.</b> Forcible rape or object sexual penetration, victim under age 13			
1 - 2 counts .....	312	208	117
3 counts .....	882	588	331
<b>C.</b> Forcible sodomy, victim under age 13			
1 - 2 counts .....	354	236	133
3 counts .....	882	588	331
<b>D.</b> Forcible rape or object sexual penetration, victim age 13 or older			
1 count .....	402	268	151
2 counts .....	882	588	331
<b>E.</b> Forcible sodomy, victim age 13 or older			
1 count .....	324	216	122
2 counts .....	882	588	331

**Score**  
▼  

--	--	--

**Primary Offense Remaining Counts** Assign points to each count of the primary not scored above and total the points

Maximum Penalty:	10 .....	5
(years)	Life .....	18

▼  

0		
---	--	--

**Additional Offenses** Assign points to each additional offense (including counts) and total the points

Maximum Penalty:	Less than 2 .....	0
(years)	2, 3 .....	1
	4, 5 .....	2
	10 .....	5
	20 .....	9
	30 .....	14
	40 or more .....	18

▼  

0		
---	--	--

**Weapon Used, Brandished, Feigned or Threatened** \_\_\_\_\_ If YES, add 39 →

0		
---	--	--

**Victim Injury** \_\_\_\_\_

Threatened or emotional .....	3
Physical .....	20
Life threatening .....	76

▼  

0		
---	--	--

**Prior Felony Sexual Assault Convictions/Adjudications** \_\_\_\_\_

Number	1 .....	13
of Counts:	2 .....	26
	3 or more .....	39

▼  

0		
---	--	--

**Total Score** \_\_\_\_\_

See **Rape Section C Recommendation Table** for guidelines sentence range.

If necessary, on the cover sheet also enter the adjusted high end of the guidelines sentence range based on Risk Level:  1  2  3 or  n/a

Rape/Section C

--	--	--	--



# Additional Offenses Continuation Sheet

Offender Name: \_\_\_\_\_

Offense	Counts	VCC	Offense Date		
			Month	Day	Year
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
_____	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>