

**Texas Department of Criminal Justice  
ACADEMY DEMERIT ASSESSMENT NOTIFICATION**

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Trainee Name or #: \_\_\_\_\_ Month/Day of Birth: \_\_\_\_\_  
(mm/dd)

Charged with violation of Academy Rule #/Description: \_\_\_\_\_  
\_\_\_\_\_

according to the Listing of Academy Rule Violations (Attachment A to PD-33).

I, \_\_\_\_\_, Trainee # \_\_\_\_\_, am providing the following statement:  
(Print) First Name MI Last Name (if applicable)

\_\_\_\_\_  
Trainee Signature

\_\_\_\_\_  
Date (mm/dd/yyyy)

**Note to Trainee: With few exceptions, you are entitled upon request: (1) to be informed about the information the TDCJ collects about you; and (2) under Texas Government Code §§552.021 and 552.023, to receive and review the collected information. Under Texas Government Code §559.004, you are also entitled to request, in accordance with TDCJ procedures, that incorrect information the TDCJ has collected about you be corrected.**

**Disposition:**

Number of demerits assessed for this violation: \_\_\_\_\_ Total number of demerits assessed to date: \_\_\_\_\_

Counsel by Training Instructor

Training Instructor Name:

\_\_\_\_\_  
(Print) First MI Last

\_\_\_\_\_  
Signature Date (mm/dd/yyyy)

Counsel by Academy Supervisor

Separation from TDCJ Employment

Training Supervisor Name:

\_\_\_\_\_  
(Print) First MI Last

\_\_\_\_\_  
Signature Date (mm/dd/yyyy)

Distribution: Copy – Trainee; Copy – Academy Supervisor