

**ILLINOIS MURDERER AND VIOLENT OFFENDER  
AGAINST YOUTH REGISTRATION ACT  
REGISTRATION FORM**

- Juvenile Delinquent  
 Murderer with child victim  
 Murderer with adult victim  
 Other Violent Offender

**Photo Required**  
(Please type or print using black ink)

|   |                                  |   |   |                                  |   |
|---|----------------------------------|---|---|----------------------------------|---|
| Initial Registration: <input type="checkbox"/>  | Annual: <input type="checkbox"/> | Homeless Weekly: <input type="checkbox"/> | Change of Address: <input type="checkbox"/> | School: <input type="checkbox"/> | Employment: <input type="checkbox"/>  |
| <b>Last Name:</b> _____ <b>First Name:</b> _____ <b>Middle Name:</b> _____  |                                  |   |   |                                  |   |
| <b>DOB:</b> _____   |                                  | <b>Sex:</b> _____                         | <b>Race:</b> _____                          | <b>POB:</b> _____                |   |
| <b>Residence Address:</b> _____   |                                  |   |   |                                  | <b>Apartment #:</b> _____   |
| <b>City:</b> _____  |                                  | <b>State:</b> _____                       | <b>Zip:</b> _____                           | <b>County:</b> _____             |   |
| <b>Telephone(s):</b> _____  |                                  |   | <b>SSN:</b> _____                           |                                  |   |
| <b>Scars/Marks/Tattoos:</b> _____   |                                  |   |   |                                  |   |
| <b>Hgt:</b> _____   | <b>Wgt:</b> _____                | <b>Hair:</b> _____                        | <b>Eyes:</b> _____                          |                                  |   |
| <b>Aliases:</b> _____   |                                  |   |   |                                  | <b>DNA:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>FBI:</b> _____   |                                  | <b>SID:</b> _____                         | <b>LEADS #:</b> _____                       |                                  |   |
| <b>DOC:</b> _____   |                                  | <b>Chgo IR #:</b> _____                   | <b>Misc #:</b> _____                        |                                  |   |
| <b>DLN:</b> _____   |                                  | <b>State:</b> _____                       | <b>Expiration Date:</b> _____               |                                  |   |
| <b>Vehicle Make:</b> _____  |                                  | <b>Model:</b> _____                       | <b>Year:</b> _____                          |                                  |   |
| <b>License Plate #:</b> _____   |                                  | <b>VIN #:</b> _____                       | <b>Color:</b> _____                         |                                  |   |
| <b>Date of Conviction / Adjudication:</b> _____   |                                  |   | <b>Age of Victim(s):</b> _____              |                                  |   |
| <b>County of Conviction:</b> <b>C</b>   |                                  |   | <b>State of Conviction:</b> _____           |                                  |   |
| <b>Offense:</b> _____   |                                  |   | <b>Statute:</b> <b>1</b>                    |                                  |   |
| <b>Citation Code:</b> _____   |                                  |   | <b>Sentence:</b> _____                      |                                  |   |
| <b>EMPLOYMENT INFORMATION</b>   |                                  |   |   |                                  |   |
| <b>Employer's Name:</b> _____   |                                  |   | <b>Employed Since:</b> _____                |                                  |   |
| <b>Employer's Address:</b> _____  |                                  |   | <b>Employer's Phone Number:</b> _____       |                                  |   |
| <b>City:</b> _____  | <b>State:</b> _____              | <b>Zip:</b> _____                         | <b>County:</b> _____                        |                                  |   |
| <b>SCHOOL / INSTITUTION OF HIGHER EDUCATION INFORMATION</b>   |                                  |   |   |                                  |   |
| <b>School/Institution of Higher Education Name:</b> _____   |                                  |   |   | <b>Date Enrolled:</b> _____      |   |
| <b>School Address:</b> _____  |                                  |   |   |                                  |   |
| <b>City:</b> _____  | <b>State:</b> _____              | <b>Zip:</b> _____                         | <b>County:</b> _____                        |                                  |   |
| <b>Additional Information:</b> _____  |                                  |   |   |                                  |   |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>The State's Attorney of the county of conviction has provided a Verification of Case Facts Document verifying this offense was not sexually motivated.</b> |                                  |   |   |                                  |   |
| <b>Registering Official's Signature</b> _____   |                                  |   | <b>Date</b> <b>11/17/2014</b>               |                                  |   |
| <b>Signature of Registrant</b> _____  |                                  |   | <b>Date</b> <b>11/17/2014</b>               |                                  |   |
| Registration is not valid until Page 2 is completed. Offender must sign both page 1 and 2.  |                                  |   |   |                                  |   |
| Page 1 of 2<br>ISP 5-751 (04/12)  |                                  |   |   |                                  |   |

**DUTY TO REGISTER. READ FOLLOWING TO OFFENDER and OFFENDER MUST INITIAL EACH.**

\_\_\_ You must renew your registration in person with the law enforcement agency having jurisdiction within one year from the date of your most recent registration until your expungement date.

\_\_\_ If you attend a school, post secondary, trade, professional institution, institution of higher education or are employed in another state, you must register in both states within 5 days of beginning school or employment. All changes of school status (commencement or termination) and employment must be reported within 5 days of change.

\_\_\_ If you are an offender identified as a child murderer you must register in person every year for the period of your natural life.

\_\_\_ If you attend and/or are employed at an institution of higher education, you must register, in person, with the jurisdiction of residence and jurisdiction where the institution of higher education is located within 5 days of beginning school or employment. All changes of status in enrollment and/or employment at an institution of higher education (commencement, termination, and any and all changes) must be reported in person within 5 days of changes with both agencies of jurisdiction.

\_\_\_ Failure to comply with the provisions of the Murderer and Violent Offender Against Youth Registration Act is a Class 3 felony. It is a Class 2 felony if you have a second or subsequent conviction for violation of this Act. Any person who is required to register under this Act who knowingly or willfully gives material information required by this Act that is false is guilty of a Class 3 felony. **Failure to comply with any provisions of the Act mandates revocation of probation, mandatory supervised release, parole, or conditional release.**

\_\_\_ The term of registration will be administratively extended by the Illinois State Police 10 years for failure to comply with any provisions of the Act.

\_\_\_ An out-of-state student and/or out-of-state employee residing in another state but attending school/institution of higher education, and/or employed in Illinois, must, within 5 days of beginning school or employment, register with the agency of jurisdiction where the school/institution of higher education or employment is located.

\_\_\_ You must register within 5 days of conviction when sentenced to probation or upon release, parole, or discharge from prison or mental hospital. Reconfinement due to violation of parole or other circumstances which relate to the original conviction or adjudication shall extend the period of registration to 10 years after final parole, discharge, or release. You must register, in person, with the police department or, if none, the sheriff's office having jurisdiction where you reside for a period of 10 years.

\_\_\_ Within 5 days of changing your address, you must report your new address in person with the law enforcement agency with whom you last registered. You must, within 5 days of changing your address, register in person with the police department or, if none, the sheriff's office having jurisdiction at your new address. Temporary absences for more than 5 days in a calendar year require you to register your new address.

\_\_\_ Any person required to register under this Act who lacks a fixed residence must notify the agency with jurisdiction of the last known address within 5 days after ceasing to have a fixed residence, and if the offender leaves the last jurisdiction of residence, the offender must, within 48 hours after leaving, register in person with the new agency of jurisdiction and must report weekly in person with the agency having jurisdiction.

\_\_\_ You must register your employment or school information within 5 days of obtaining employment or attending a school. All changes to employment or school status must be registered in person within 5 days of the change.

\_\_\_ If you intend to establish a residence or employment outside of Illinois, you must report in person to the agency with whom you last registered in Illinois at least 10 days prior.

Failure to register is a criminal offense and will extend my registration period 10 years from my next registration, if not already subject to lifetime registration.

According to 720 ILCS 5/11-9.3 & 9.4, if you were convicted of child abduction, kidnapping, aggravated kidnapping, unlawful restraint, aggravated unlawful restraint or an attempt to commit any of these offenses, you are considered a child sex offender. According to Illinois law, you may not reside or loiter within 500 feet of a school, park, or playground. You may also not reside or loiter within 500 feet of a facility providing services directed exclusively toward persons under 18 years of age. The only exception is if you, the child sex offender, owned the property before July 7, 2000.

**I HAVE READ AND/OR HAD READ TO ME, THE ABOVE REQUIREMENTS. IT HAS BEEN EXPLAINED TO ME AND I UNDERSTAND MY DUTY TO REGISTER ON OR BEFORE \_\_\_\_\_.** All ending registration dates will be determined by the Illinois State Police. To verify the ending registration date, contact the Illinois State Police at 217/785-0653 or mail correspondence to the address listed below.

Signature of Registrant \_\_\_\_\_ Date \_\_\_\_\_

Offender must sign both page 1 and page 2 for registration to be considered valid.

Registering Official's Name (Print) Todd Carlson

Registering Agency: Hanover Park IL Police Department

Address: Village of Hanover Park 2121 West Lake Street

City, Zip, County: Hanover Park 60133, Cook

Registering Official's Signature: \_\_\_\_\_

Registering Official's Phone Number: \_\_\_\_\_

**Fingerprints should be taken at the initial registration and any subsequent registration in a new jurisdiction.**

For additional information: Illinois State Police, SOR Unit, 801 South 7th Street, Suite 200-S, Springfield, Illinois 62703 phone (217) 785-0653.

One copy to Offender

One Copy to Illinois State Police

Retain Original for your Files

Page 2 of 2

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