

MORRIS COUNTY PROSECUTOR'S OFFICE

SEX OFFENDER REGISTRATION PROCESS



When a sex offender appears at a Police Department to register, his/ her registration **MUST** be taken at that time. The registration must be done in a private location, not open to the public.

The process is as follows:

1. **Sex Offender Registration Form.** Complete the form with information provided by the Registrant. No lines should be blank. If the Registrant cannot provide the required information, "Unknown" should be placed on the line. The ORIGINAL must be forwarded to the MCPO-Megan's Law Unit. Lines should not be left blank-if information is "unknown" or "unavailable," note this in the appropriate space.
2. **Acknowledgement of Duties Form.** Complete and provide a copy to the Registrant. The ORIGINAL must be forwarded to the MCPO-Megan's Law Unit.
3. **Sex Offender Print Cards.** NJSP requires that print cards be submitted through Live Scan. A copy of the Card must also be printed out and forwarded to the MCPO-Megan's Law Unit.
4. **Photograph the Registrant.** Two types of photographs must be taken:
 - A. Digital photographs- Two digital photographs are to be taken. They shall then be emailed to afragomeni@co.morris.nj.us . In the body of the email the following information shall be included:
 - the registrant's name
 - date of birth
 - date of registration
 - B. Live Scan- Second, if you have Live Scan photographing capability, the Registrant MUST be photographed with Live Scan and these photographs must be submitted to the NJSP through Live Scan. (Plain background- no placard) Please note on the Registration form that the photos were submitted.
5. **Address Confirmation.** Within three business days of registration, an **in person** visit to the registrant's address must be done to confirm residency. The Address Confirmation Form, must then be completed, and forwarded to the MCPO-Megan's Law Unit

The registration process shall be completed in a private area, outside of public view, or the registrant shall be permitted to complete the registration form without verbal communication of the information (which might publicly identify the registrant as a sex offender).

Within three business days, forward to the attention of the Megan's Law Unit the following:

- a. ***DO NOT RETURN THE INSTRUCTION SHEET OR BLANK FORMS!***
- b. Transmittal Form
- c. Original Sex Offender Registration Form
- d. Original Acknowledgement of Duties Forms
- e. One Sex Offender Print Card
- f. Digital photographs (Emailed)

NOTE 1: The Address Confirmation should be completed **after a home visit has been completed**. Copies of leases or bills, may be used to supplement the confirmation, but may not be used as the sole basis of address confirmation.

NOTE 2: Information on all motor vehicles which the registrant has access to must be included on the Sex Offender Print Cards.

NOTE 3: Police departments may maintain additional information on sex offenders (This information is **not** for public review).

Revised 06/19/2014



MORRIS COUNTY PROSECUTOR'S OFFICE

SEX OFFENDER REGISTRATION FORM

PHOTOS SUBMITTED
VIA LIVE SCAN?
DATE: _____

AGENCY _____ OFFICER _____ DATE _____	
NAME _____ DATE OF BIRTH _____	
Last First Middle	
RESIDENTIAL ADDRESS _____ PHONE _____	
Number Street Town	
MAILING ADDRESS (If Applicable) _____ E-MAIL ADDRESS _____	
POB _____ SS# _____ RACE _____ ALIAS _____ DL _____	
HT _____ WT _____ EYES _____ HAIR _____ SCARS/MARKS _____	
TEMPORARY ADDRESS: _____	
ALL VEHICLES REGISTRANT HAS ACCESS TO:	MAKE /MODEL _____ YR _____ COLOR _____ REG _____ STATE _____
	MAKE/MODEL _____ YR _____ COLOR _____ REG _____ STATE _____
EMPLOYER _____	SCHOOL _____
ADDRESS _____	ADDRESS _____
Street Town	Street Town
PHONE _____	PHONE _____ GRADE _____
CRIME(S) _____	
VICTIM'S NAME _____ AGE _____ RELATIONSHIP _____	
VICTIM'S NAME _____ AGE _____ RELATIONSHIP _____	
DATE OF CONVICTION/ADJUDICATION _____ COUNTY _____ STATE _____	
SENTENCE _____	
DATE OF RELEASE FROM _____ CURRENTLY ON _____	
PRISON/JAIL _____ PAROLE _____ PROBATION _____ PROBATION/PAROLE?	
NAME OF PROBATION/PAROLE OFFICER _____ OFFICER'S NUMBER _____	

ARE YOU CURRENTLY INVOLVED IN PSYCHOLOGICAL COUNSELING REGARDING YOUR STATUS AS A SEX OFFENDER? _____

WITH WHOM? _____ ADDRESS _____ PHONE _____

CLUBS / ORGANIZATIONS TO WHICH YOU BELONG (LIST ADDRESSES) _____

EMERGENCY CONTACT _____

WITH WHOM ARE YOU LIVING _____

PERSONS UNDER THE AGE OF 18 WITH WHOM YOU RESIDE/WORK

NAME _____ RELATIONSHIP _____ DOB _____

NAME _____ RELATIONSHIP _____ DOB _____

IN ACCORDANCE WITH THE PROVISIONS OF N.J.S.A.2C:7-1, YOU ARE REQUIRED TO RE-REGISTER WITH THE LOCAL POLICE DEPARTMENT IN THE TOWN IN WHICH YOU RESIDE AND THE TOWN WHICH YOU WILL BE MOVING TO, **EVERY TIME YOU RELOCATE TO AN ADDRESS THAT IS DIFFERENT FROM THE ONE LISTED ON YOUR PREVIOUS REGISTRATION. THIS MUST BE DONE 10 DAYS BEFORE YOU RELOCATE.** YOU MUST ALSO RE-REGISTER WITH YOUR LOCAL POLICE DEPARTMENT EITHER EVERY 90 DAYS OR ANNUALLY, AS PROVIDED BY LAW. FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL SUBJECT YOU TO PENALTIES AS SET FORTH IN THE STATUTE. YOUR CASE MAY BE DISCUSSED WITH OTHER LAW ENFORCEMENT AGENCIES AND /OR MENTAL HEALTH PROFESSIONALS.

NEXT REGISTRATION DATE: _____

OFFICER'S SIGNATURE _____

REGISTRANT'S SIGNATURE _____

STATE OF NEW JERSEY

ACKNOWLEDGMENT OF DUTY TO REGISTER, RE-REGISTER AND VERIFY ADDRESS

NAME: _____ SBI# _____ DOB: _____

INTENDED ADDRESS: _____

In accordance with the provisions of N.J.S.A. 2C:7-1 et seq (Megan's Law) you are required to personally register, re-register and verify your address with your local or state police in the municipality where you reside. Failure to do so is a crime, and subjects you to up to 5 years in prison pursuant to N.J.S.A. 2C:7-2.

(Initials)

1. _____ I understand that I must **verify** my address with the police department where I live **every year**, or if my municipality does not have a local police department, with the State Police, or **every 90 days** with the local police department, or if my municipality does not have a local police department, with the State Police, if I am found to be a repetitive and compulsive sex offender.

2. _____ I understand that this verification must be in person and I must provide proof of that address, such as a letter or a bill. I understand that the verification is due on the anniversary of my initial registration, or most recent re-registration resulting from a change of address. I understand that I may be charged with failure to verify my address, a 3rd degree offense, if I fail to comply.

3. _____ I understand that if I **move**, I must notify the local police department where I am registered, and the police department where I intend to live, at least **10 days** before I move. I must then **re-register** in my new town. Verification of that address is due the year after the re-registration date. I understand that if I move out of New Jersey and then move back to New Jersey, I must re-register within **10 days** of returning to this State with the local law enforcement agency in the town where I live. I understand that if I **move** to another State, I will be subject to any and all laws governing sex offender registration procedures in that State.

4. _____ I understand that if I **work** or **attend school** in another State, but remain a New Jersey resident, I must still register in the State I am employed or attend school. This out of state registration is in addition to the registration in my home town, and does not change my obligation to register where I live in New Jersey.

5. _____ I understand that if I **enroll** or **work** at any public or private educational institution in New Jersey, on a part or full time basis, I must register within **10 days** of commencement of such attendance or employment with the law enforcement unit of the educational institution, or if no law enforcement unit exists, with the police department having primary jurisdiction over the campus.

6. _____ I understand that I must notify the police department with which I am registered **in person** of any change of employment or school enrollment status within **5 days** of such change.

7. _____ I understand that I must register with the chief law enforcement officer of the municipality in which I intend to reside within **48 hours** of my release from this institution. I understand that I may be charged with failure to register or re-register, a 3rd degree offense, as required by law.

8. _____ I understand that if I remain offense free for **15 years** from the date of conviction or release from prison, whichever is later, I may apply to the Superior Court to be relieved of my obligation to register, **unless I have more than one sex offense or if any of the offenses were Aggravated Sexual Assault or Sexual Assault.**

I, _____, have read the above eight (8) paragraphs to _____
(Officer's Name) (Registrant's Name)
and provided him/her a copy of this Acknowledgment.

Date: _____ Officer's Signature: _____

Date: _____ Registrant's Name: _____
(Please Print)

Registrant's Signature: _____

MORRIS COUNTY PROSECUTOR'S OFFICE
SUPPLEMENTAL ACKNOWLEDGEMENT OF DUTIES FORM

1. _____ I understand that if I consider myself homeless, I must select a town and location where I spend the majority of my time, that I will provide to law enforcement, in order to fulfill my registration obligation.
2. _____ I understand that if I am homeless and only intend on staying at a location temporarily while I look for something more permanent, I understand I must register with the local police department in the municipality I am temporarily residing.
3. _____ I understand that every state has some type of registration, and if I move from New Jersey to another state, it is my responsibility to determine my registration requirements in another state.
4. _____ I understand that if I am employed, attend school, or carry on a vocation at an institute of higher education *(PLEASE CIRCLE ONE)* in the United States, for more than 14 consecutive days in a calendar year, or an aggregate of more than 30 days in a calendar year, I must register my employment, educational or vocational address with the local Police Department.

5. _____ I am employed, attend school, or carry on a vocation at the following institute of higher education:

NAME: _____

ADDRESS: _____

CITY/STATE: _____

POSITION: _____

6. _____ I understand that I must provide this law enforcement agency with information as to whether or not I have routine access to a computer or any other device with Internet capability. Failure to do so, or providing false information, could result in my arrest.

(CIRCLE ONE)

a) Access to computer YES NO b) Access to other device with internet capability? YES NO

c) Type of Device _____

7. _____ I understand that my failure to comply with any of these requirements or providing false registration information could result in my arrest.

I, _____, have read the above seven (7) paragraphs to
(Officer's Name)

_____ and provided him/her a copy of this Acknowledgment.
(Registrant's Name)

Date: _____ Officer's Signature: _____

Date: _____ Registrant's Name: _____
(Please Print)

Date: _____ Registrant's Signature: _____

**MORRIS COUNTY PROSECUTOR'S OFFICE
ADDRESS CONFIRMATION FORM**

NAME: _____ DATE OF HOME VISIT: _____

ADDRESS: _____

FORM OF CONFIRMATION: _____

(Please provide a narrative regarding how confirmation was completed, and date of in person home visit. Include any copies of any telephone, electric, cable, etc. bills supplied if applicable.)

OFFICER'S NAME: _____ BADGE #: _____

OFFICER'S SIGNATURE: _____ DATE: _____

CHANGE OF STATUS

Registrants are required to give the police department in the town in which they are residing ten days notice, before moving to another address. If their new address is located in a different municipality, they are also required to go to the police department in their new community and register.

I. REGISTRANT CHANGING ADDRESS WITHIN THE SAME MUNICIPALITY:

If the registrant comes to register and is living at a different address in the same municipality, it shall be treated as a **New Registration**, and the regular sex offender registration process and all appropriate forms must be completed. The Change of Status Form must also be completed.

NOTE: A registrant who changes apartments within the same complex, or room numbers in the same boarding house, must be treated as a new registration.

II. REGISTRANT MOVING OUT OF REGISTERING MUNICIPALITY:

If the Registrant is **leaving your municipality** to reside in another jurisdiction, you must:

1. Complete Sex Offender Print Cards, including the residence in your town as the temporary address and the address that the registrant is moving to as the actual residence.
2. Take two photographs. Submit the photograph to NJSP via Live Scan.
3. Take two digital photographs of the Registrant and Email the photograph to afragomeni@co.morris.nj.us, including the registrant's name, date of birth and date of registration
4. A Change of Status Form must be completed.

These items must be forwarded to the Morris County Prosecutor's Office—Megan's Law Unit, within three business days.

III. OTHER CHANGES IN REGISTRATION:

If information becomes available between registration dates that shows a change of status in other registration information, such as a new motor vehicle, or change of employment, you must complete the Change of Status Form. This form must be forwarded to the Morris County Prosecutor's Office—Megan's Law Unit, within three business days.

MORRIS COUNTY PROSECUTOR'S OFFICE
SEX OFFENDER
CHANGE OF STATUS FORM

NAME _____ DATE _____

OLD ADDRESS _____

NEW ADDRESS _____

PHONE _____ MOVING DATE _____

NEW EMPLOYMENT _____

ADDRESS _____ PHONE _____

NEW SCHOOL _____

ADDRESS _____ PHONE _____

VEHICLE: MODEL _____ YR _____ COLOR _____ REG _____

E-MAIL ADDRESS _____

HAVE YOU NOTIFIED THE POLICE DEPARTMENT IN THE TOWN TO WHICH YOU ARE MOVING?

IN ACCORDANCE WITH THE PROVISIONS OF N.J.S.A.2C:7-1, YOU ARE REQUIRED TO RE-REGISTER WITH THE LOCAL POLICE DEPARTMENT EVERY TIME YOU RELOCATE TO AN ADDRESS THAT IS DIFFERENT FROM THE ONE LISTED ON YOUR PREVIOUS REGISTRATION. YOU MUST ALSO VERIFY YOUR ADDRESS WITH YOUR LOCAL POLICE DEPARTMENT EITHER EVERY 90 DAYS OR ANNUALLY, AS PROVIDED BY LAW. FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL SUBJECT YOU TO PENALTIES AS SET FORTH IN THE STATUTE.

OFFICER'S SIGNATURE

BADGE #

REGISTRANT'S SIGNATURE

DEPARTMENT

ADDITIONAL INFORMATION: