

## NOTICE AND CONSENT FOR PSYCHOSEXUAL EVALUATION

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A psychosexual evaluation is being performed pursuant to guidelines and standards established in Sections 18-8314 and 18-8316, Idaho Code. In order to conform to Idaho regulations, the psychosexual evaluation must include certain topics of a personal and detailed nature which may be difficult to discuss. The psychosexual evaluation will also include several psychological tests.

(Initial each statement of understanding below)

\_\_\_ I understand that the results of the psychosexual evaluation will be released to relevant individuals which may include a defense attorney, prosecuting attorney, the court, presentence investigator, probation or parole officer, treatment provider or other relevant people. Release of the psychosexual evaluation is not automatic and requires authorization. Authorization for release of the psychosexual evaluation may come from the court, the Commission for Pardons and Parole, or through a plea agreement with the prosecuting attorney, even if I don't want the results of the psychosexual evaluation released.

\_\_\_ I understand that if it has only been authorized to release the psychosexual evaluation to my defense attorney or myself, then only my defense attorney and myself will receive a copy from the evaluator. However, if the evaluator receives an order from the court indicating the psychosexual evaluation must be released to other individuals, the evaluator must release the report. Other individuals may include, but are not limited to, the prosecuting attorney, the court, presentence investigator, probation or parole officer, treatment provider, or other relevant people.

\_\_\_ I understand that I may sign a release of information form directing the evaluator to release the psychosexual evaluation and the evaluator will likely release the psychosexual evaluation to the individual indicated on the form. Additionally, if I agree to release the psychosexual evaluation as a condition of probation or parole, the psychosexual evaluation will likely be released to my probation or parole officer.

\_\_\_ I understand that there are limits to confidentiality in the psychosexual evaluation process. The evaluator may be obligated under Idaho law to report newly disclosed acts of abuse or crimes of violence to appropriate authorities.

\_\_\_ I understand that in order to write the psychosexual evaluation, the evaluator may consider details of past behavior that led to my arrest, details from my history, psychological test results, results from specialized assessment measures designed to evaluate sexual offenders, police reports, criminal history, and other relevant documents. Additionally, polygraph results, interviews with victim(s), and interviews with other relevant people could be considered. The evaluator could also consider relevant research for making report conclusions.

\_\_\_ I understand the psychosexual evaluation may discuss the potential harm I could cause another individual in the community (this might include my household, neighborhood, county, etc.), and discuss what types of people in the community I may engage with if I was to commit a sexual

offense in the future (such as males, females, children, adolescents, adults, vulnerable people, or others).

\_\_\_ I understand the psychosexual evaluation is a process intended to estimate a person's risk to commit a sexual offense in the future. After completing the psychosexual evaluation, the evaluator may estimate me as being either a low, moderate, or high risk to reoffend.

\_\_\_ I understand the psychosexual evaluation is a process to determine my amenability for treatment. Amenability for treatment can be understood as my willingness to participate in treatment, motivation for treatment, likelihood to understand treatment, and likelihood to make changes through treatment.

\_\_\_ I understand the psychosexual evaluation may also provide recommendations on how I could be supervised if I am living in the community. Supervision could come from a probation or parole officer, treatment provider, or other.

\_\_\_ I understand the psychosexual evaluation does not make a recommendation for sentencing by the court, but the conclusions made in the psychosexual evaluation could influence the sentencing process. Conclusions could also influence treatment requirements and probation or parole conditions.

\_\_\_ I understand the psychosexual evaluation conclusions could impact sexual offender registration.

\_\_\_ I understand that I have the constitutional right to refuse to participate in any or all aspects of the psychosexual evaluation.

\_\_\_ I have discussed my participation in this psychosexual evaluation including the effect on my right against self incrimination with a criminal defense attorney and agree to proceed.

\_\_\_ I have been provided the opportunity to discuss my participation in this psychosexual evaluation with a criminal defense attorney and I agree to proceed without having such discussion.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent or Guardian (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date