



ASSEMBLY STANDING COMMITTEE ON CORRECTION

SUBJECT: Programs for incarcerated individuals funded in the State Fiscal Year 2024-25 Enacted Budget

PURPOSE: To examine the delivery of programs and resources for incarcerated individuals and formerly incarcerated individuals funded in the State Fiscal Year 2024-25 Enacted Budget

Date: December 13, 2024

Time: 10:00 a.m.

Location: Hearing Room B
Legislative Office Building, Albany, NY

ORAL TESTIMONY WILL BE BY INVITATION ONLY

The New York State Department of Corrections and Community Supervision (DOCCS) offers a wide range of programs for incarcerated individuals, including rehabilitative, therapeutic, educational, and vocational programming. The State Fiscal Year 2024-25 Enacted Budget includes funding for educational programming to help incarcerated individuals without high school diplomas receive New York State High School Equivalency Diplomas, Medication Assisted Treatment (M.A.T.) services, employment opportunities to assist with vocational or employment skills training, and residential stabilization for formerly incarcerated individuals in the community. These programs are critical in supporting the reentry of incarcerated individuals upon release and preventing recidivism.

The Committee seeks to examine the delivery of programming to incarcerated individuals and formerly incarcerated individuals such as the availability of programs offered throughout DOCCS facilities, the costs of such programs, and the interest and enrollment of incarcerated individuals in DOCCS programs.

Persons invited to present pertinent testimony to the Committee at the above hearing should complete and return the enclosed reply form as soon as possible. It is important that the reply form be fully completed and returned so that persons may be notified in the event of emergency postponement or cancellation.

Oral testimony will be limited to 5 minutes' duration. In preparing the order of witnesses, the Committee will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible.

Ten copies of any prepared testimony should be submitted at the hearing registration desk. The Committee would appreciate advance receipt of prepared statements.

Attendees and participants at any legislative public hearing should be aware that these proceedings are video recorded. Their likenesses may be included in any video coverage shown on television or the internet.

In order to further publicize these hearings, please inform interested parties and organizations of the Committee's interest in hearing testimony from all sources. In order to meet the needs of those who may have a disability, the Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), has made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.

Erik Dilan
Member of Assembly
Chair
Assembly Standing Committee on Correction

PUBLIC HEARING REPLY FORM

Persons invited to present testimony at the public hearing on programs for incarcerated individuals funded in the enacted 2024-2025 State Budget are requested to complete this reply form as soon as possible and mail, email, or fax it to:

Sujaya Balachandran
Analyst
Assembly Committee on Correction
Room 513 – Capitol
Albany, New York 12248
Email: balachandrans@nyassembly.gov
Phone: (518) 455-4313
Fax: (518) 455-7250

- I plan to attend the following public hearing on impact and effectiveness of programming for incarcerated individuals to be conducted by the Assembly Committee on Correction on December 13, 2024.

- I have been invited to make a public statement at the hearing. My statement will be limited to 5 minutes, and I will answer any questions which may arise. I will provide 10 copies of my prepared statement.

- I will address my remarks to the following subjects:

- I do not plan to attend the above hearing.

- I would like to be added to the Committee mailing list for notices and reports.

- I would like to be removed from the Committee mailing list.

- I will require assistance and/or handicapped accessibility information. **Please specify the type of assistance required:** _____

NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

E-MAIL: _____

TELEPHONE: _____