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 Received by
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**New South Wales Police Force
 Notification Letter**

Dear [REDACTED],

Please consider this letter as notice that you are being monitored under the NSWPF's Suspect Target Management Plan (STMP). You have been identified as someone at risk of involvement in criminal activity and suitable for proactive police engagement.

STMP aims to protect the community from harm by preventing and disrupting crime.

We expect that your cooperation with this management plan will improve your prospects by reducing or deterring any involvement in criminal activity.

Depending on your case, you may be offered relevant resources or be made aware of more proactive disruption strategies.

While it is not mandatory, we strongly encourage you to participate, as we believe this will generate the best outcome for you. Your choice to participate (or not) may be reported to the Court.

It is also important to note that you will be monitored under STMP whether you choose to cooperate or not.

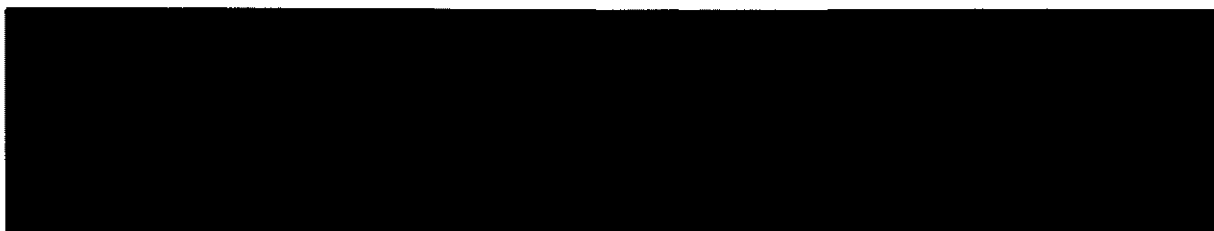
Please find your proposed STMP strategy for future discussion below. Your plan will be reviewed every three months to determine whether to continue to target you under the STMP. For example, we will discontinue your involvement as an STMP should you no longer engage in criminal activity; we will also discontinue your involvement as an STMP should you be in custody, for the duration of incarceration.

STMP Nomination	[REDACTED]		
STMP Parent/Guardian (persons under 18 years)	Name: DOB: Address:		
STMP Nomination Date	[REDACTED]		
Command	[REDACTED]	Region	Central Metropolitan



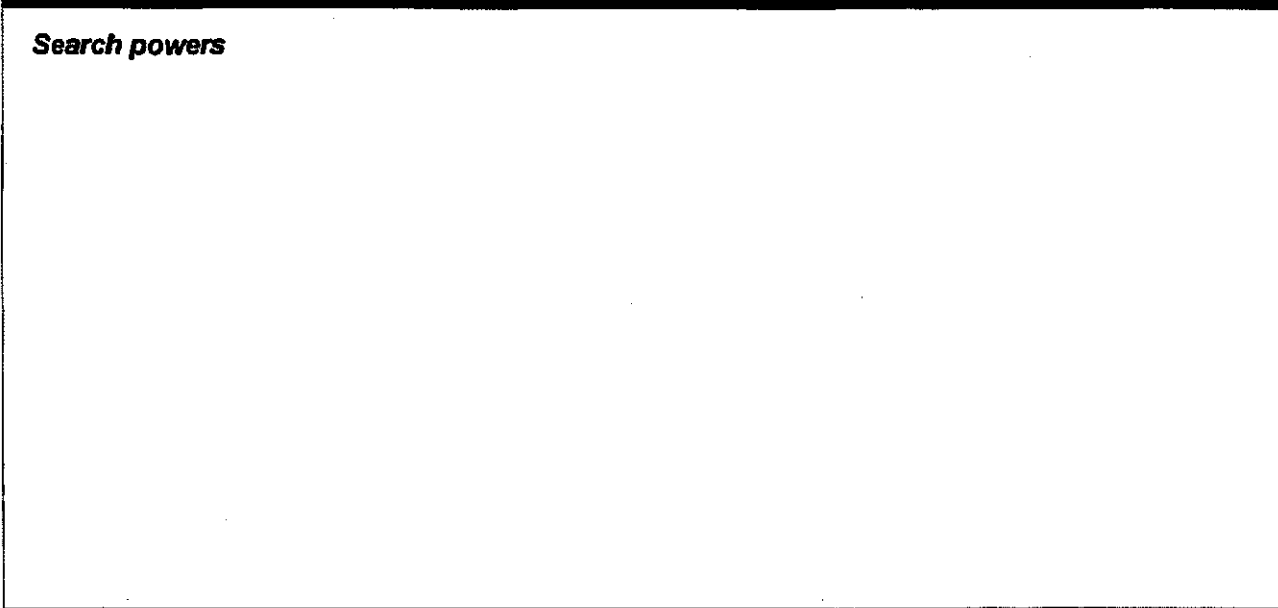
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Goals & Objectives



Prevention strategy

Search powers



TRIPLE ZERO (000)
Emergency only

POLICE ASSISTANCE LINE (131 444)
For non emergencies

CRIME STOPPERS (1800 333 000)
Report crime anonymously

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I, [REDACTED], agree that the diversion strategies have been explained to me by .

In the case of a child under the age of 18 years:

I Click or tap here to enter text. agree that the diversion strategies have been explained to me by Click or tap here to enter text. in the presence of Click or tap here to enter text..

I understand that I have been nominated as an STMP for [REDACTED]. I understand that I will be monitored to prevent my involvement in criminal offending behaviour and agree to participate in the outlined strategies.

I understand that I will be managed for a period of 3 months, and that my STMP status will be reviewed on [REDACTED]

Signature/Name:	[REDACTED]
Case Officer Name:	[REDACTED]
Case Officer Signature:	[REDACTED]
Case Officer Rank:	[REDACTED]
Date:	[REDACTED]
Commander/Manager:	[REDACTED]

