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| **Type of Application****[ ]** New Application[ ]  Renewal/Update[ ]  Limited Service | IDAHO DEPARTMENT OF CORRECTIONVolunteer Application | IDOCLogo9 |
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| **Personal Information***The following information is required for a criminal history check. Applicants must be at least 18 years of age. Provide* ***all*** *information with no blank spaces (use N/A if not applicable).**Form can be completed on computer then printed or printed and completed by hand.* |
| List facilities you intend to volunteer at:       |
| Last Name:       | First Name:       | MI:       |
| Maiden Name or Alias:       | Social Security No:       | DOB:       |
| Street Address:       | City:       | State:    | ZIP:       |
| Mailing Address (if different):       | City:       | State:    | ZIP:       |
| Other States Lived in:       | Driver’s License No:       | State Issued:       |
| [ ]  Male [ ]  Female  |
| Email:       | Home:        | Cell:       | Work:        |
| Emergency Contact:       | Relationship:       | Contact No:       |
| Organization Affiliation (religious volunteers must disclose faith and organization):       |
| Organization Address:       |
| Contact Person:       | Phone No:       |
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| **Volunteer and Correctional History** |
| Are you on an offender’s visiting list: [ ]  No [ ]  Yes If yes, what facility:      Offender’s Name (list all):       IDOC No:       Relationship:       |
| Do you have any relatives or friends incarcerated in Idaho (including county jails)? [ ]  Yes [ ]  NoIf yes, list each name and facility:       |
| Have you ever been a victim of an offender incarcerated at an IDOC facility? [ ]  Yes [ ]  No |
| Have you ever worked for the IDOC or volunteered at a correctional facility? [ ]  Yes [ ]  No  If yes, when?       Where?       Organization or Affiliation?       |
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| **Criminal History***Include convictions in all states. Do not include convictions expunged under federal or state law or minor traffic violations.* |
| Have you ever been convicted of a misdemeanor (within 3 years)? [ ]  Yes [ ]  NoWhen, Where, Charge, Disposition (list all):        |
| Have you ever been convicted of a felony? [ ]  Yes [ ]  NoWhen, Where, Charge, Disposition (list all):       |
| Do you have any criminal charges currently pending? [ ]  Yes [ ]  No If yes, please explain:       |
| Are you now or have you ever been placed on probation or parole? [ ]  Yes [ ]  No If yes, provide beginning and ending dates:       to       PO Name:       |
| Have you ever been a member of a gang? [ ]  Yes [ ]  No If yes, name of gang:        |
|   |
| **Signature:** | **Date:** |

**Submit this application to the facility Volunteer Coordinator – Information can be found at** <http://www.idoc.idaho.gov/content/prisons/volunteer_services/volunteer_coordinators>

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| **For Use By Idaho Department Of Correction Only**  |
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| ***ILETS Operator*****Criminal Background Check:** [ ]  No criminal record[ ]  No misdemeanor drug conviction within the last 3 years[ ]  No felony conviction[ ]  Has a misdemeanor drug conviction within the last 3 years (complete and attach HRS [H Form](http://www.idoc.idaho.gov/content/form/1046))[ ]  Has a felony conviction (complete and attach HRS [H Form](http://www.idoc.idaho.gov/content/form/1046)) |
| ILETS Operator Name and Associate # (print): | Date: |
| **Volunteer and Religion Coordinator** |
| **Type of Volunteer:**  |
| [ ]  New | [ ]  Regular | [ ]  Restricted Access | [ ]  TC Alumni | [ ]  Limited Service |
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| Recommend: [ ]  Yes [ ]  No |
| If no, please explain:  |
| Signature: | Date: |
| **Deputy Warden (Second-in-Command)** |
| Recommend: [ ]  Yes [ ]  No |
| If no, please explain:  |
| Signature: | Date: |
| **Facility Head** |
| Approved: [ ]  Yes [ ]  No |
| If no, please explain:  |
| Signature: | Date: |
| ***If needed, Prisons Division deputy chief, / CWC operations manager (attach H form) or another facility head*** |
| Approved: [ ]  Yes [ ]  No |
| If no, please explain:  |
| Signature: | Date: |