

Kent City Jail Application

Mail forms to:

Greater Seattle Intergroup
5507 Sixth Avenue S.
Seattle, WA 98108



Program _____
 Approved By _____
 Date _____

**CITY OF KENT CORRECTIONS FACILITY
 VOLUNTEER APPLICATION**

Please PRINT or TYPE. Complete all spaces on the application. If something does not apply, write "Not Applicable" in the space. A security check and orientation must be completed before a volunteer is approved to enter the facility. It is the volunteer's responsibility to inform their volunteer coordinator and the City of Kent Corrections Program Coordinator (253 856-5972) of any changes to the below information. Failure to do so may result in removal from the volunteer list.

Last Name _____ First _____ M _____

Birth Date ____ / ____ / ____ Place of Birth _____ S.S.# ____ / ____ / ____

Race _____ Sex _____ Height _____ Weight _____ Hair _____ Eyes _____

Home Address _____ City _____ State _____ Zip _____

Place of Work _____

Home Phone (____) _____ Work Phone (____) _____

Driver's License # _____ State _____

List three (3) character references from the King County area:

1) Name _____ Home Phone (____) _____

Address _____ City _____ State _____ Zip _____

2) Name _____ Home Phone (____) _____

Address _____ City _____ State _____ Zip _____

3) Name _____ Home Phone (____) _____

Address _____ City _____ State _____ Zip _____

Volunteer program applying for? _____

Volunteer Application

Page 2

Have you been ARRESTED, CITED, CONVICTED or been a SUSPECT in any offense?

YES NO

If yes, give details below. Use a second sheet of paper for additional offenses.

Last Offense _____ Date _____

Description: _____

Disposition: _____

Next Offense _____ Date _____

Description: _____

Disposition: _____

Next Offense _____ Date _____

Description: _____

Disposition: _____

Why do you want to be a volunteer?

Describe your academic and spiritual background.

Volunteer Application

Page 3

*****To be completed by Ministerial Volunteers Only*****

Church _____ Church Phone (____) _____

Church Address _____ City _____ State _____ Zip _____

Your Position _____ Superior's Title and Name _____

Do you have ministerial credentials? _____

Date of Ordination/Credentials _____ Current? [] YES [] NO

Names of ministerial affiliations/associations/fellowships, etc. _____

Applicant's Printed Name

Applicant's Signature

Date

Volunteer Coordinator's Signature

Date

Program Coordinator's Signature

Date

*i sorry I'm late
all on -
they need to sign this last
sheet also*



CITY OF KENT CORRECTIONS FACILITY VOLUNTEER ORIENTATION

CLEARANCE:

All volunteers must be cleared by the Program Coordinators prior to coming into the facility to include the following steps:

- 1) Complete an application.
- 2) Pass a security and criminal history check. Individuals with criminal convictions in the last three years are ineligible to apply for the volunteer program.
- 3) A check for any special relationships between the volunteer and inmates will be completed.
- 4) All volunteers will attend an orientation meeting with their Volunteer Coordinator prior to being added to the volunteer list.

ENTERING THE FACILITY:

- 1) You must have picture ID.
- 2) Identify yourself to the Administration Clerk or the Control Officer. Give your name and the type of meeting.
- 3) You must leave your ID with the Administration Clerk or place your ID in the control room drawer. Close the drawer before going into the facility. This will prevent anyone from taking your ID before the Control Officer can secure it.

BE ON TIME:

- 1) Please be prompt for your appointed time. The jail is run on a fairly strict schedule and arriving late may result in your program being cancelled. Also, do not run past your scheduled time as other activities may be scheduled to follow you.
- 2) Keep in mind that there are times when unexpected situations/emergencies may arise preventing your admittance into the facility. Please be patient and understanding under these circumstances.

AUTHORIZED AREAS FOR VOLUNTEERS:

- 1) Multi-Purpose, Contact Visiting and Booking – Open to volunteers.
- 2) Living Units – Must be accompanied by a Corrections Officer.
- 3) Control Room – Volunteers are not authorized to enter the Control Room.
- 4) All purses, bags, briefcases, etc. must be left in your vehicle or the lockers in the salleyport by Contact Visiting.
- 5) Do Not bring anything into the facility other than class materials, which have been approved by the Program Coordinators. Do not leave any items with the inmates including pens or pencils with erasers.

DEALING WITH INMATES:

- 1) Inmate Rights – Do not advocate for an inmate. If an inmate feels that their rights have been violated and attempts to pursue the issue in your program, advise the inmate to follow the jail grievance procedure. However, if you perceive there is a situation requiring immediate attention, contact the shift supervisor.
- 2) Professional Relationships – Maintain a professional relationship with inmates. Immediately contact the Program Coordinators or a shift supervisor if you recognize that you have a special relationship with an inmate.
- 3) Psychological Counseling – Do not perform psychological counseling and bring up people's past. When inmates return to their cells with thoughts of a traumatic past, it may cause them to become despondent. This may become a factor in a suicide or suicide attempt. Teach your subject and do not counsel.
- 4) Suicide – **NOTIFY STAFF IMMEDIATELY IF YOU SUSPECT AN INMATE MAY BE ANTICIPATING COMMITTING SUICIDE.**

FIGHTS OR PROBLEMS:

- 1) Call for staff assistance immediately! This can be done by pushing the intercom button on the wall. Wait for the Control Officer to respond over the intercom, then tell them you need immediate assistance.
- 2) Allow staff to handle the situation without interference.
- 3) Once the situation is brought under control, you may be asked to complete a report – verbal or written.

HOSTAGE SITUATION:

Kent Corrections Facility has a “no hostage” policy. This means that the staff will not allow, under any circumstance, a hostage taker to be released or gain special privileges in order to free hostages. **YOUR RESPONSE IS IMPORTANT!**

- 1) Notify the Control Officer immediately to get help.
- 2) **DON'T** get involved, let the professionals handle it.
- 3) Stay calm and out of the way. Follow any instructions promptly.
- 4) Expect the Kent Corrections Facility staff to minimize any movement in the facility. It is likely that commissioned police officers will become involved.

RELEASING PERSONAL INFORMATION:

Do not give your personal address or phone number to the inmates. This creates a situation where the volunteer becomes vulnerable and can easily be manipulated. This situation has occurred in the past with our volunteers and can be avoided by following our recommendation. If an inmate asks for your help, refer them to the Program Coordinators, or one of the agencies that can help with housing or other problems of concern to the inmate.

GIFTS:

- 1) Do not give any gifts to inmates without prior approval from the Program Coordinators.
- 2) Do not accept any gifts from an inmate.

PHYSICAL CONTACT:

Volunteers should avoid hugging or other demonstrative forms of affection with inmates.

CUSTODY LEVEL AND PARTICIPATION IN PROGRAMS:

- 1) The four living unit classifications at the Kent Corrections facility are Trusty, General, Intermediate and Maximum..
- 2) Inmates held in administrative segregation will be allowed to participate in the same programs as the general population, as long as their participation does not jeopardize the security of the facility.
- 3) Separate classes must be held for men and women.

CONTRABAND:

Any attempt to introduce contraband at this facility will result in your arrest and prosecution. Punishment of up to 10 years imprisonment, a \$20,000 fine, or both may be imposed (Chapter 9A.76 R.C.W.: Introducing Contraband).

I have read and understand the City of Kent Corrections Facility Volunteer Orientation and agree to conduct my volunteer activities according to their philosophy, policies and guidelines.

X _____
Volunteer's Printed Name

X _____ Date
Volunteer's Signature

_____ Date
Volunteer Coordinator's Signature

_____ Date
Program Coordinator's Signature