

Government of Newfoundland and Labrador Her Majesty's Penitentiary, Department of Justice

VOLUNTEER APPLICATION

Name:	
Current Address (For How Long):	Telephone:
Previous Address (For How Long):	
Date of Birth:	
Sex:	
Length of Anticipated Commitment:	
Occupation:	
Present Employer:	
Type of volunteer work preferred and your reasons for wanti	ng to volunteer:
Particular Qualifications/Skills:	
Prior Experience as a Volunteer	
Prior experience working with offenders and/or incarcerated i	ndividuals:

	elated persons)	Please incl	ude full n	ame, addr	ress, telephone
	elated persons)	Please incl	ude full n	ame, addr	ress, telephone
•	elated persons)	Please incl	ude full n 2.	ame, addı	ress, telephone
References (2 non-renumber(s)	elated persons)	Please incl		ame, addr	ress, telephone

VOLUNTEER GUIDELINES

- 1. Must be 19 years of age.
- 2. Must have a picture ID.
- 3. To participate in orientation training when said training is available.
- 4. Volunteer access to the institution will be determined by the Officer-In-Charge.
- 5. Volunteers must sign an agreement indicating that they will abide by the rules and regulations of the institution.
- 6. Relatives of an inmate may not serve as a volunteer in the facility where that inmate is confined.
- 7. Volunteers may be denied access to the institution for any of the following violations:
 - a) Unlawful conduct
 - b) Breach of institutional rules
 - c) Medical or emotional disorders
 - d) Inability to cooperate with staff
 - e) Breach of confidentiality
 - f) Erratic, unreliable attendance
 - g) Any activity that threatens the security or good order of the institution or the safety of the inmates, staff or other volunteers
 - h) The Officer-In-Charge at his/her discretion can deny access at any time.

- 8. Volunteers will be required to have a Criminal Records Screening Certificate completed prior to processing of the volunteer request.
- 9. Volunteer(s) give permission to the Department of Justice to contact the abovenamed references and if necessary, to make inquiries with the police authority to ascertain your suitability to volunteer within this setting.
- 10. A new Criminal Records Screening Certificate can be requested yearly.

VOLUNTEER AGREEMENT

I sincerely and truly declare that I will faithfully, honestly and impartially perform my duties as a Volunteer abiding by the rules and regulations of the institution.

I will disclose any information which may come to me in the performance of my duties as a Volunteer which represents a threat of harm to an individual, inmate, staff member or the public at large, to the Officer-In-Charge.

I acknowledge that I am not permitted to bring any item into the prison, or to bring any item out of the prison on behalf of any inmate without prior approval of the Officer-In Charge.

I acknowledge having read the Volunteer Guidelines and agree to honour each.

Signature	×	Date	

- > Completion of the Volunteer Application Form and Confidentiality does not guarantee acceptance into the program
- > Please allow three (3) weeks for processing