



Bexar County Sheriff's Office

Javier Salazar, Sheriff



SECURITY CLEARANCE REQUEST

To: Identification Section

Date: _____

Please process this applicant for official identification (Security I.D. Pass) The applicant should be finger-printed and handled in the same manner as a regular employee (F.B.I., DPS, and local fingerprint cards, with NCIC/TCIC printout.)

Please run the fingerprint cards and submit to Detention Admin, where all completed applicants shall be reviewed for acceptance.

Thank you,
Deputy Chief Laura Balditt

() Fingerprints with NCIC/TCIC
() Picture

EMPLOYEES

Please Check One

- MAINTENANCE
- MEDICAL
- HOUSEKEEPING
- FOOD SERVICE
- GED/JPTA

VOLUNTEERS

Please Check One

- MINISTRY CHAPEL
- HUMAN SERVICE
- MATCH/PATCH
- INTERN
- OTHER (Education)

(NO SID REQUIRED)

MAIN JAIL & ANNEX

TYPE OF ID:

- GREEN
- YELLOW
- RED

<u>LAST NAME</u>	<u>FIRST</u>	<u>MIDDLE</u>	<u>Cornerstone Volunteer</u>
			<u>POSITION APPLYING FOR</u>

<u>ADDRESS</u>	<u>CITY</u>	<u>ST</u>	<u>ZIP CODE</u>	<u>PHONE NO.</u>
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<u>DOB (MM/DD/YY)</u>	<u>D.L. or ID</u>	<u>STATE ISSUED</u>	<u>SOCIAL SECURITY</u>
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1. Have you ever been employed or volunteered for the Sheriff's Office/Detention Center before? _____
If so, when, and what position did you hold? _____
2. Do you have any relatives incarcerated in the facility at this time? _____
If so, who (relationship)? _____
3. Have you ever been incarcerated at this or any other facility? _____
If so, when and where? _____

APPLICANTS DO NOT WRITE BELOW THIS LINE

<u>CONTACT PERSON</u>	<u>SECTION</u>	<u>PHONE NO.</u>
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IDENTIFICATION OFFICER

DATE

APPLICANT

DATE: _____
POSITION APPLYING FOR: Cornerstone Volunteer
BAIL BONDS COMPANY NAME: _____

MAIDEN NAME IF APPLICABLE _____
OR
NICKNAMES: _____ RACE: _____ SEX: _____

NAME: _____
DOB: _____ Age: _____ Hair: _____ Eyes: _____ Complexion: _____ Height: _____ Weight: _____ Build: _____

Home Address: _____ Social Security #: _____

City, State, Zip: _____ Place of Employment: _____

Telephone: _____ Address: _____

Marital Status: _____ Work Telephone #: _____

DL #: _____ Occupation: (Unemployed NOT Acceptable) _____

Type of DL: _____ Place of Birth: _____

State Issued: _____ Citizen of: _____

Physical Impairments: _____

Scars/Marks/Tattoos: _____

Emergency Contact Person (Must List One With Phone Number)	
Name:	_____
Relationship:	_____
Telephone #:	_____
Address:	_____
City, State, Zip:	_____

Contact Person: _____ Date: _____

Jail Programs
Volunteer Information Sheet

Date: _____

Last Name: _____

First Name: _____

Address: _____

City: _____ Zip: _____

E-mail: _____

Home #: _____ Work #: _____ Cell #: _____

DOB: _____

Social Security #: _____

DL# or ID #: _____

Race: _____ Gender: _____

Birth City: _____ State: _____ Citizen of: _____

Referral Agency: Cornerstone Church

Agency Telephone: 210-490-1600 ext 1748

Agency Contact Person: Tully Blanchard

Occupation: _____

Place of Employment: _____

Address: _____

Tattoos/Scars: _____

Emergency Contact Information

Contact Name: _____

Phone Numbers: _____

Address: _____

Relation: _____

Supervisor / Chaplain that you report to in the detention center:

{Please Circle}:

Roger Flores / Roger Wheeler / Sister Teresa / Ted White

Facility Rules and Regulations for Volunteers



Jail Programs Department
200 N. Comal St., San Antonio, TX 78207 (210) 335-6375

It is the policy of the Bexar County Adult Detention Center (BCADC) to use volunteers where feasible to enhance and expand the services and programs offered to the inmates. The use of volunteers provides increase personal contact for the inmate, broadens resources for the Detention Center and increases awareness of the correctional system. Volunteers supplement, but never supplant, the activities and functions of Detention Center staff. Adherence to all rules and regulations of both detention facilities is mandatory.

RULES AND REGULATIONS

A. CONTRABAND

The following items are examples of contraband and may not be brought into the facility: controlled substances, prohibited weapons, sport bags, paper sacks, lunch boxes, tote bags, brief cases, non-labeled prescribed medications, glass and/or metal containers, aluminum cans, books, magazines, letters, radios, televisions, cameras, video recorders, electronic devices, laptop computers, purses, umbrellas, cell phones, weapons, pepper spray, pocket knives, lighters, tobacco products, etc. If you are unsure whether the item you want to bring into the facility is considered contraband, please consult your section supervisor or a Jail Programs Officer.

B. APPROPRIATE ATTIRE

BC No. 2100.07 Volunteer and Citizens Involvement Policy:

Volunteers are expected to present a professional personal appearance and to follow the dress code guidelines for Non-Uniformed personnel as outlined in the Sheriff's Manual for Policy and Procedures. Volunteers are expected to dress neatly and avoid wearing suggestive or revealing clothing. Wear as little metal and jewelry as possible, as you must clear a metal detector. The following may NOT be worn: sleeveless blouses/shirts, low-cut crop tops, shorts, open toe sandals, body piercing jewelry, etc. Department supervisors may determine whether a volunteer's attire is appropriate and consistent with jail policy.

C. COMMUNICATION

Written or verbal messages or inmate property may not be transferred from one inmate to another. Never attempt to give legal advice to inmates, or contradict instructions made by security/Jail Programs staff. No communication between volunteers/interns and inmates by mail or telephone is allowed while the inmate is incarcerated at the BCADC.

Contact with an inmate upon release from a facility is prohibited. However, some exceptions do exist; you must contact your section supervisor for further information. A volunteer may not release his/her mailing address to a former inmate.

If a volunteer is unsure about how to handle a particular situation, do not hesitate to ask the Jail Programs Officers or section supervisors.

C. COMMUNICATION (continued)

New ideas and different ways of teaching rehabilitative techniques to the inmate are strongly encouraged; however, new programs/classes must be cleared and approved through the Jail Programs Manager before implementation.

The posting of inmate mail is to be handled by the Detention Center (ONLY).

Telephone calls or contacts are not to be made for inmates outside the jail. The inmates have opportunities to make calls in their living units or through the assistance of the Sergeants Office on their designated floor. Volunteers need to refer all emergency phone call requests to staff Chaplains.

No communication between volunteers/interns and inmate by mail or telephone is allowed while the inmate is incarcerated.

D. TECHNOLOGY, MEDIA, AND SUPPORT

- a. Jail Programs has the following available for presentation of your classes:
Smart-boards, laptops, televisions, audio and projectors.
- b. The technology is reserved on a first come, first serve basis; at times due to demand, you must be prepared to provide presentation without technology support.
- c. Once the equipment is set-up and you are done with the use of the technology, please leave as is; one of the staff members will ensure to shut it down and return to appropriate location.
- d. AT NO TIME are incarcerated individuals authorized to use equipment!

E. CONFIDENTIALITY

Statements about the Bexar County Adult Detention Center or inmates may not be made to the media without prior approval by Detention Administration.

Volunteers/interns must agree to protect the confidentiality of all inmates, and disclose no part of a conversation or written communication to anyone except when required by law.

All volunteers are expected to have a signed Inmate Confidentiality form in their information packet.

F. VOLUNTEER PROTOCOL

Volunteers/interns must notify their section supervisor if their relatives or friends are incarcerated at the Bexar County Adult Detention Center.

Volunteers/interns are to pick up their badge and leave their valid DL/ID at the Front Desk and return their badge and pick up their DL/ID upon departure.

Never assume anything.

F. VOLUNTEER PROTOCOL (continued)

Let the inmate know right away that before any action is taken on his/her requests that all pertinent information will be checked out with appropriate staff in the detention center.

Self-pity is a familiar face in jail. Do not contribute to this negative thinking. Point out his/her strengths and the opportunity for success by utilizing time in jail to prepare for a productive life after release.

Jail rules and guidelines are not to be bent or broken. Work within the guidelines and help the inmate to do the same. You are a role model for them.

Building positive self-concepts and instilling confidence are the primary areas of concern while working with inmates.

Avoid criticism of staff in front of inmates. Do not make derogatory remarks about any nationality, race, or religion or sexual orientation. Do not hand out literature that is derogatory of any nationality, race, or religion.

Volunteers/interns are not allowed to ride the elevator with inmates without an officer being present.

Under no circumstance should a volunteer consider signing or co-signing a bank note for any inmate. The Jail Programs Department out rightly discourages any financial encumbrances among those involved with the inmates in any capacity: volunteer, inmate, or ex-offender.

Avoid requests from inmates to reside with you after release. Our experience to date has resulted in several unhappy situations.

Beware of con games from inmates (Ex. They talk about being wealthy and offer moneymaking schemes, asking you to put up the cash).

Do not give out your address or phone number to inmates.

Divide your attention among many inmates in the classroom setting. Always be aware of the dynamics between yourself and the inmate.

Volunteers/interns are expected to display positive behavior that inmates can model after.

When a volunteer/intern must be absent, the volunteer must contact their section supervisor as early as possible.

DO NOT turn off or unplug any smart board, please contact Jail Programs Officer when you are done so that it may be properly disconnected and stored.

**AGREEMENT TO FOLLOW
BEXAR COUNTY ADULT DETENTION CENTER RULES
REGULATIONS PERTAINING TO ALL VOLUNTEERS IN ALL FACILITIES**

The Bexar County Adult Detention Center is NOT LIABLE for personal injury to volunteers while participating in any phase of the program.

The Bexar County Adult Detention Center will not be held responsible if volunteers are held hostage.

All volunteers will undergo a criminal history background check by the facility administration annually. The administrators of the facility are responsible for ultimate approval of a volunteer's participation.

If a volunteer's relatives, domestic relations, and/or associates are incarcerated in the facility where the volunteer works, a written report to Administration through the Escort Official or Jail Programs Officer shall be generated. Special permission is required from the facility administration for the volunteer's continued participation in the program. No contact with these inmates shall take place while volunteering.

Volunteers are prohibited from bringing anything in or taking anything out for individual inmates.

Posting of inmate mail is only handled by the detention center.

No messages, written or verbal, are to be taken between inmates.

Transfer of property from one inmate to another is not allowed.

Telephone calls or contacts are not to be made for inmate outside the jail.

Refer all emergency phone call requests to staff Chaplain.

Volunteers are to pick up their badge and leave their DL/ID at the front desk of the detention center, upon departure drop badge off and pick up DL/ID.

When a volunteer must be absent, the staff supervisor is to be contacted as early as possible.

When a volunteer wants to bring a visitor to the detention facility, the Escort Official must be contacted for permission and to escort the visitor. A security clearance will be issued by the facility administration.

Information regarding inmates may not be released without prior approval of the facility administration.

Statements about the detention facility or inmates may not be made to the media without prior approval by the facility administration.

Volunteers must agree to protect the confidentiality of all inmates and disclose no part of a conversation or written communication to anyone except when required by law.

No volunteer assignment is to be considered as permanent or restricted to a particular individual or group. All scheduling dissatisfaction with the staff decisions may be appealed to the Escort Official.

FACILITY:

If in doubt, volunteers are encouraged to consult facility personnel regarding matters of security and questions about policy/procedures.

REVOCAION OF VOLUNTEER STATUS: A person's volunteer status with the BCADC may be revoked for any of the following reasons, but not limited to:

1. Breach of confidentiality.
2. Failure to report a threat to the safety or security of any person within the facility.
3. Unlawful conduct or breach of facility rules and regulations.
4. Inability to cooperate with the staff.
5. Physical or emotional illness.
6. Erratic, or emotional attendance.
7. Personal or romantic involvement with an inmate.
8. Services of the volunteer are no longer needed.
9. Program activity which the volunteer represents has been completed.

Jail Programs

Volunteer Acknowledgement

1. I have read and understand the information in the Facility Rules and Regulations.
2. I understand that training will be provided to assist me in being successful in this volunteer opportunity. I further understand that staff members will be available to answer questions and provide information throughout my service as a volunteer.
3. I understand that all and client information is confidential and is not to be discussed outside of the Bexar County Adult Detention Center.
4. I understand that I may not give a inmate legal advice.
5. I understand that if my circumstance should change and it becomes impossible to complete my commitment as a volunteer, it is my responsibility to inform my section supervisor.

Volunteer Signature

Date

Escort Official

CONSENT TO SEARCH

I understand that the Sheriff is charged by law with the responsibility to protect the public through the safekeeping of prisoners.

Initials

I understand that the mission of the Sheriff is to maintain a facility that is free from weapons, drugs and other prohibited items that would create an unsafe environment for the general public, employees, visitors, volunteers and inmates of the facility.

Initials

I understand that random searches of staff, visitors, and volunteers are authorized by policy of the Detention facilities and that these searches may be conducted at the security entrance points as ordered by the Sheriff or at anytime and anywhere in the secured perimeter.

Initials

I understand that as a condition of the privilege to work as a volunteer in the secured perimeter, I am subject to being searched at any time.

Initials

I have been given the opportunity to ask questions in reference to the searches that will be conducted and would like to state that I understand the conditions and terms of entering the security perimeter.

Initials

By signing this "Consent to Search" form, I state that I understand all the above. I hereby give full consent to be searched at any time while in the secured perimeters of both Detention facilities and also give consent to being searched prior to entering the security perimeters.

Signature of Person Consenting

Date

Signature witnessed by

Date

CONFIDENTIALITY AGREEMENT

I, _____ agree to protect the confidentiality of all individuals housed at the Bexar County Adult Detention Center and disclose no part of a conversation or written communication to anyone except when required by law. I understand that violation of privileged information may lead to dismissal and possible legal action by the inmate.

INMATE CONFIDENTIALITY

The nature of volunteer work lends itself to developing confidential relationships with inmates. All inmate confidential information is to be respected, including information regarding their incarceration at the Bexar County Adult Detention. No information regarding inmates may be released without approval of the Detention Center Administrators.

Volunteer Signature

Date

COUNTY OF BEXAR

AGREEMENT INCLUDING WAIVER AND RELEASE

The County of Bexar ("County") on condition of your signing this waiver and affirming the promises and statements contained below, agrees to permit you to enter its property at the Main Jail and the Annex facilities for volunteer training conducted by the Bexar County Sheriff's Office.

I, _____, acknowledge the following statements are true:

I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while on the premises, or else agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

On behalf of myself, my heirs, personal representatives and executors, I hereby disclaim, release and waive any and all claims against the COUNTY for personal injuries or damages to property sustained by myself or any other person arising out of my entering onto this property, including claims and damages arising in whole or in part from the negligence of the COUNTY, its agents or employees.

IT IS MY EXPRESS INTENT TO RELEASE THE COUNTY FROM ANY AND ALL CLAIMS ARISING FROM MY ENTERING ONTO THIS PROPERTY REGARDLESS OF WHETHER SUCH CLAIMS ARE FOUNDED IN WHOLE OR IN PART UPON ALLEGED NEGLIGENCE OF COUNTY, ITS AGENTS OR EMPLOYEES.

In signing this release and waiver I am relying wholly upon my own judgment, belief and knowledge. By signing this document, I acknowledge that I may be found by a court of law to have waived my right to maintain a lawsuit against the COUNTY on the basis of any claim from which I have released it herein. I have had sufficient opportunity to read this entire document. I have read it, I understand it, and I agree to be bound by its terms.

SIGNATURE	DATE
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HOME ADDRESS	CITY	STATE	ZIP CODE
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TELEPHONE NUMBER	EMERGENCY NUMBER
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