

READ FIRST!!!!!!!

VITAL INFORMATION FROM DEPARTMENT OF JUVENILE JUSTICE

The Volunteer Self-Check for Background Check needs to be completed (**with no errors or cross-outs**) then signed and notarized. It needs to be returned to kimberlym@billglass.org with a clear copy of your Driver's License and Social Security card **OR** a clear copy of your Passport (see Options listed on the form).

Common Errors to avoid on the Volunteer Self-Check for Background Check:

- 1) Information must be written legibly
- 2) Check to make sure the name on the form identically matches the name on the provided state issued identification; if you have any maiden names or aliases (e.g., your name is Thomas, but you are sometimes called Tom or Tommy) include those where it asks for "additional names"
- 3) Ensure that the Social Security and Driver's License numbers are included on the form even if a Passport is being provided
- 4) Make sure that your signature date and the date it is notarized match and that the Notary's seal is visible
- 5) Make sure the Notary's commission is not expired

- 6) The final form, Volunteer/Guest Consent and PREA Acknowledgement needs to be initialed as it is read and then signed & witnessed on pages 2 and 4.

As I mentioned on the phone, our Criminal History Unit is extremely busy at this time so processing has been somewhat delayed. The sooner paperwork is received the better it will be for insuring everyone is processed timely and no one is left out of the event.



Volunteer Self Checklist for the Background Check

Completion of this portion is mandatory.

Please answer the following questions using information back to your 16th birthday.

1. Have you been convicted of an assault, battery, or sexual offense when the victim was a minor? Yes No
2. Have you been convicted of contributing to the delinquency of a minor? Yes No

If you answered yes to any question above, you are not eligible to volunteer with DJJ. If you answered no to all questions or if you have a conviction under First Offenders Act, you may apply and be considered to volunteer. Please complete the next set of questions.

3. Do you have a pending criminal charge? Yes No
4. Are you on active probation? Yes No
5. Have you been convicted of a felony? Yes No
6. Have you been convicted of Cruelty to Children Yes No
7. Have you been convicted of misdemeanors involving drugs and/or alcohol in the past 2 years? Yes No

Stop! Do not complete the Criminal/Driver History Consent Form until you complete the above self-checklist.

CRIMINAL/DRIVER HISTORY CONSENT FORM

I hereby authorize the Department of Juvenile Justice to receive all criminal and driver's history information pertaining to me anytime during the course of my relationship with the Department. I understand that convictions revealed from these background investigations may impact my ability to volunteer with the Department.

To establish identity and volunteer employment status, unexpired identification will be needed from every applicant. Choose from the options below and submit copies of identification along with this consent form.

Option 1

Check which identification will be used

State issued Driver's License or ID or Federal, State, or Local Government agency issued ID
(IDs must contain a photo or info such as name, date of birth, gender, height, eye color, address)

And

Social Security Card (name on card must match name on Driver's License) or Original or certified copy of birth certificate

Option 2

U.S. Passport or U.S. Passport Card

Please do not submit consent form with errors including lined out or scratch through.

Last Name:		First Name:		Middle Name:	
Address:		City:		State:	Zip Code:
Email Address:		Contact Number:		Alternate Number:	
Date of Birth:		Place of Birth:		SSN (enter nine numbers legibly):	
Race:	Gender:	Hair Color:	Eye Color:	Height:	Weight:
Driver's License Number:		Driver's License State:		Expiration Year:	
List additional names previously used (include Maiden name) if applicable. Enter information in boxes to the right. →		1.		3.	
		2.		4.	
Current DJJ Employee		List Volunteer Site Below		Volunteer Coordinator	
Yes or NO (circle your response)					

Applicant Signature: _____

Date: _____

SWORN TO AND SUBSCRIBED BEFORE ME:

This _____ Day of _____, 20____

(Notary Public)

My commission expires _____



VOLUNTEER/ GUEST CONSENT AND PREA ACKNOWLEDGEMENT

By signing this form, you are stating that you agree and will comply with Georgia Department of Juvenile Justice and the applicable laws of the State of Georgia in order to uphold the safety, security and integrity of the Department of Juvenile Justice and its offices/facilities/programs/staff/volunteers/youth by abiding by and complying with the below:

_____ (Initials of Volunteer/Guest) **CONFIDENTIALITY**- All information regarding the youth, their offenses, their victims, their families, their care, housing and treatment is confidential and will not be disclosed.

_____ (Initials of Volunteer/Guest) **CONTRABAND** -Pursuant to O.C.G.A. § 49-4A-18, it is a felony, with a punishment of 1-4 years imprisonment, for detained juveniles to have in their possession any device or component of a device that allows communication with someone outside a facility. It is also a felony for employees, volunteers or any others to give, obtain for, or attempt to give/obtain for a detained juvenile any device or component.

_____ (Initials of Volunteer/Guest) **CONTRABAND**- Pursuant to O.C.G.A. §49-4A-16, it is a felony, with a punishment of 1-4 years imprisonment for anyone to cross the facility guard lines with the following items: gun, pistol, knife, or any other weapon or a bullet, ammunition, explosive device, or any intoxicating liquor, amphetamines, marijuana, or any other hallucinogenic or other drugs.

_____ (Initials of Volunteer/Guest) **CONTRABAND**- It is unlawful to possess any weapon, object that can be made into a weapon, knife, cell phone, alcoholic beverage, drug, sexually explicit or obscene material, or any other forbidden items while on DJJ property.

_____ (Initials of Volunteer/Guest) **CONTRABAND**- I agree that I will not give any of the above items to any youth at the DJJ facility, nor any other contraband, including but not limited to, cigarettes or other tobacco products, matches, lighters, or money.

_____ (Initials of Volunteer/Guest) **CONTRABAND**- I understand that if I violate any prohibitions or rules related to contraband that I may be denied future visits to DJJ facility/facilities and may be referred for prosecution, which could result in imprisonment for 1-5 years.

_____ (Initials of Volunteer/Guest) **CONSENT TO SEARCH**- As a condition of my admittance to DJJ facility/facilities, I consent to a search of my person, an any minor child accompanying me, by means of a frisk or pat down or by use of a mechanical device.

_____ (Initials of Volunteer/Guest) **CONSENT TO SEARCH**- I understand that if I refuse to submit to any search that I will be refused admission to the facility. I further understand that handbags, briefcases and packages are prohibited in the facility.

_____ (Initials of Volunteer/Guest) **WAIVER OF LIABILITY**- In consideration of having been accepted as a volunteer by the Department of Juvenile Justice and with the knowledge that I will be working, directly and indirectly, with juveniles, I recognize fully that my presence may involve some element of risk.

_____ (Initials of Volunteer/Guest) **WAIVER OF LIABILITY**- I, do hereby waive and release any and all rights or claims of any kind of nature which may exist or accrue in the future against the Georgia Department of Juvenile Justice, its personnel, employees, staff or agents because of, as a result of, or in connection with the duties, responsibilities and work which I will undertake.

_____ (Initials of Volunteer/Guest) **CONSENT FOR BACKGROUND INVESTIGATION** –I hereby give the Georgia Department of Juvenile Justice authority to make inquiries with police/law enforcement agencies as may be deemed necessary to ascertain my suitability as a volunteer.

_____ (Initials of Volunteer/Guest) **FACILITY/OFFICE/LOCATION ACCESS**- I understand that my admission to any DJJ facility/office/location can be denied at any time that it is deemed by DJJ to be detrimental to myself or others or when the potential risk outweighs the potential benefit of my being allowed access to said location.

_____ (Initials of Volunteer/Guest) **FACILITY/OFFICE/LOCATION ACCESS**- I agree to bring with me to each visit a picture identification that will be left with security staff at the facility entrance and that during each visit I will be required to wear and prominently display a DJJ issued ID or Visitors pass/badge for the duration of all visits.

_____ (Initials of Volunteer/Guest) **FACILITY/OFFICE/LOCATION ACCESS**- I agree to sign in and out upon each and every entrance and exit to any DJJ facility/office/location. Refusal to sign will lead to denial of entry.

_____ (Initials of Volunteer/Guest) **FACILITY/OFFICE/LOCATION ACCESS**- All keys will be left at the control room/gatehouse/ front entrance and chit provided in exchange for said keys.

_____ (Initials of Volunteer/Guest) **TERMINATION OF SERVICES**- I understand that at any time my services as a Volunteer/Guest may be terminated by the Georgia Department of Juvenile Justice and that no appeal process for such termination exists.

_____ (Initials of Volunteer/Guest) **VOLUNTARY SERVICE ACKNOWLEDGEMENT**- I fully understand and agree that I will be providing a service in my capacity as Volunteer/Guest without any expressed or implied promise or expectation of compensation or employee benefit.

My signature below indicates my understanding of the information contained in this document and my willingness to comply with the expectations set forth.

PRINTED NAME

SIGNATURE

DATE

WITNESS SIGNATURE

WITNESS TITLE

DATE

Prison Rape Elimination Act (PREA) Acknowledgement

By signing this form, you are stating that you agree and will comply with Georgia Department of Juvenile sexual abuse and sexual harassment policies as summarized below.

In accordance with the 2003 Prison Rape Elimination Act, the Department of Juvenile Justice (DJJ) has a zero tolerance policy for sexual abuse/assault or sexual harassment to any youth in our custody. The Department will have all reported incidents of sexual abuse/assaults investigated, and will address the safety and treatment needs of youth who have been sexually abuse/assaulted, and will discipline and prosecute those who sexually abuse/assault any youth.

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): Any employee, volunteer, contractor, vendor or intern can and will accept any information from a youth regarding sexual abuse, sexual assault or sexual harassment and will immediately report the information to one of the following: a facility staff member, the Georgia Network to End Sexual Assault (GNESA), Local Rape Crisis Center, Abuse, National Sexual Abuse Hotline, DJJ Tip line, GA DJJ Victim Services, GA DJJ Ombudsman Office or the Agency PREA Program Coordinator. A youth may feel more comfortable reporting sexual abuse or sexual harassment to someone other than a staff member and all individuals are legally bound to immediately report the information for further actions including medical and mental health treatment to the suspect, collection of evidence, criminal investigation, and other necessary procedures. Time is of the essence in reporting sexual abuse/assault and sexual harassment.

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): The general definition of sexual abuse/assault is engaging in, or attempting to engage in, a sexual act with any youth or the intentional touching of a youth's genitalia, anus, groin, breast, inner thigh, or buttocks, with the intent to abuse, humiliate, harass, degrade, arouse, or gratify the sexual desire of any person. Sexual acts or contacts between a youth and a staff member, even when no objections are raised, are always illegal, and by law, considered non-consensual.

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): Sexual abuse by a youth – includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

Contact between the penis and vulva or the penis and the anus, including penetration, however slight; contact between the mouth and the penis, vulva, or anus; penetration of the anal or genital opening of another person, however slight, by a hand, finger, object or their instrument; and any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, where the youth has the intent to abuse, arouse, or gratify sexual desire and excluding contact incidental to a physical altercation.

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): Sexual abuse by a staff/contractor /volunteer or intern – includes any of the following acts, with or without consent of the youth:

Contact between the penis and the vulva or the penis and the anus, including penetration, however slight; contact between the mouth and the penis, vulva, or anus; contact between the mouth and any body part where the staff/contractor/volunteer or intern has the intent to abuse, arouse, or gratify sexual desire; penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire; any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire; any attempt, threat, or request by a staff/contractor, or volunteer to engage in the activities describe in PREA standards. Any display by a

staff/contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of a youth, and voyeurism by a staff/contractor/volunteer/or intern.

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): **Sexual harassment – includes:**

1. *Repeated or unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one youth directed toward another; and*
2. *Repeated or unwelcome verbal comments or gestures of a sexual nature to a youth by a staff/contractor/volunteer or intern, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.*

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): **Sexual Misconduct – any act of sexual abuse and/or sexual harassment as defined herein.**

_____(Staff/Volunteer/Contractor/Intern/Vendor/Tour Initials): **I have received and reviewed the Georgia Department of Juvenile Justice PREA Policy 23.1.**

Signature

Printed Name

Date

Witness Signature

Title

Date