

# APPLICATION FOR AA VOLUNTEER

Yellowstone County Detention Facility

3165 King Avenue East

Billings, MT 59101

406-256-6881

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ (Home)

\_\_\_\_\_ (Cell)

Name of Group: \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Phone # for Sponsor: \_\_\_\_\_

How Long Have You Been With This Group? \_\_\_\_\_

Have you ever been convicted of a felony?

YES \_\_\_\_\_ NO \_\_\_\_\_ Date \_\_\_\_\_ Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Have you ever been convicted of a misdemeanor?**

**YES** \_\_\_\_\_ **NO** \_\_\_\_\_ **Date** \_\_\_\_\_ **Explain:** \_\_\_\_\_

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**List Two Personal References: (Not Employer)**

**#1**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Relationship** \_\_\_\_\_

**Phone#** \_\_\_\_\_

**#2**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Relationship** \_\_\_\_\_

**Phone#** \_\_\_\_\_

**The information that I have provided is accurate and complete.**

**I authorize Yellowstone County Detention Facility to investigate all of the Information that I have provided on this application. In the event that I am Approved to conduct meetings within the facility, I agree to abide by all the Rules governing volunteers who enter this facility as discussed during The orientation meeting.**

**Signature of Applicant** \_\_\_\_\_

**Date:** \_\_\_\_\_



## **VOLUNTEER AGREEMENT/WAIVER**

As a Detention Facility or prison volunteer, I understand and hereby agree to the following:

1. I will **BRING NOTHING IN** and **TAKE NOTHING OUT** for any inmate.
2. I will not exchange any personal property with any inmate. I am not allowed to accept any gifts from, or give any gifts to, any inmate.
3. I will not make purchases in the community for any inmate.
4. I will not sell anything to or enter into any business transaction with any inmates or their family.
5. I will not give books, tape recorders, etc. to any inmate.
6. I will never accept a personal service from, or perform a personal service for, any inmate. This includes, but is not limited to making phone calls, mailing letters, or delivering messages or packages to anyone in the community or another part of the Facility.
7. I will not become involved in any conflicts between inmates and/or staff.
8. I will not bring weapons, ammunition, or explosives into the Facility.
9. I will not bring any medications, alcohol or drugs to any inmate.
10. I understand that cameras, tape recorders or news media people are not allowed in the Facility without advanced clearance.
11. I will arrive and depart punctually and will report my arrival and departure promptly to the officer in charge.
12. I may be denied access to any Facility or Prison unit and may be subject to search of my person or vehicle for justifiable security purposes.
13. I will not give out any information concerning any Facility or Prison Inmate. All communication between inmate and volunteer is considered confidential.
14. I know that there is some risk involved in giving addresses, phone numbers, and other personal information to any inmate.
15. I understand that being taken hostage will not be recognized as an advantage for the hostage taker(s).
16. I will totally exempt the county and/or state and any of its agencies from any or all liability that may arise as a result of volunteer activity in the Facility. This includes minors under my care and control.
17. I will conduct my volunteer activities according to the Facility or Prison policies and procedures.

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Facility/location

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Volunteer Name (Print)

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Date

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Volunteer Signature