

VOLUNTEER APPLICATION FORM

Position Applied For _____ Date _____

PERSONAL INFORMATION

Name _____ Social Security _____

Address _____ How long at this address _____

Home Phone _____ Work Phone _____

Place of Birth _____ Date of Birth _____ Sex _____ Race _____ Age _____

Driver's lic. #: _____ HGT: _____ WGT: _____ EYES: _____ HAIR: _____

Marital Status _____ Are you a Citizen of the United States (Yes or No) _____

Personal Health and Habits

Are you currently under a physicians care? _____

Do you consume alcoholic beverages? _____ What is weekly/monthly rate of consumption _____

Have you or are you now using drugs/medications for any reason? _____

If you answered yes to any of the above questions, please explain (use extra sheet if necessary).

Person To Notify In Case of An Emergency

Name _____ Relationship _____ Phone # _____

Legal Record

Have you ever been arrested? _____ Have you ever been convicted of a crime? _____

Have you ever served time? _____ If yes to any of these questions, please explain (use extra sheet if necessary).

To be signed following interview with Chaplain:

VOLUNTER AGREEMENT

I hereby certify that all information contained in this application is correct. I give my permission for all references and employers specified in this application to be contacted. I give my permission for any law enforcement agency files pertaining to me to be examined. I realize that any false information contained herein is grounds for this application to be rejected and/or any privilege to serve as a volunteer to be subsequently terminated.

I affirm that I have read and understand the conditions for public access to the _____

_____ (name of Institution) which emphasizes the inherently dangerous nature of the jail environment and notes that by signing this agreement, the undersigned explicitly:

- 1 – Assumes the risk for any injury which may occur in connection with the jail visit, including but not limited to the risk of being taken hostage while on premises.
- 2 – I have read and understand the implications of the "No Hostage" policy at the Kings County Sheriff's Department Detention Center as indicated by my signature on enclosed "Hold Harmless and Indemnification Agreement."
- 3 – Has read and agrees to abide by Detention rules for clergy/volunteer visitation.
- 4 – Will comply with verbal instructions of the officer-in-charge.

Failure to comply with above rules is cause for immediate dismissal.

Volunteer Application _____ Date _____

HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

I, _____, hereinafter referred to as "permittee," hereby agrees and promises to indemnify and save harmless, and shall indemnify and save harmless, the Sheriff of Kings County and his officers, agents, servants, or employees from and against any and all liability, claims demands, damages, expenses, fees, fines, of any kind and nature arising or growing out of or in any way connected with the use, occupancy, maintenance or control of the Kings County Sheriff's premises or equipment by permittee, or arising out of or in any way connected with any act of omission of the Sheriff of Kings County or his officers, agents, servants or employees, whether in or about the Kings County Sheriff's premises or equipment or resulting from injury to person or property, or loss of life or property of any kind or nature whatsoever sustained during the use, occupancy, maintenance, or control of the Kings County Sheriff's premises or equipment by permittee while or during anytime period when the Sheriff of Kings County is allowing permittee to enter the premises of the Kings County Jail to:

Do volunteer work in conjunction with the Chaplain's Department

Which is the consideration for the promises and covenants herein made and agreed to by the permittee.

I understand that a limited check of state and federal records will be conducted concerning me and local inquiries may be made at the agencies I represent.

(Date)

(Signature of Applicant)