

Personal Data Sheet

Identification

Name _____ Social Security _____

Address _____ Driver's License#/State _____

City _____ State _____ Zip _____

Telephone (Work) _____ (Home) _____ (Cell) _____

Current Employment _____

Personal Motivation

Why are you interested in working in corrections? _____

Special Skills: Teacher/GED Recreational Services Counseling Services Library Services
Ministry Career Training Mentoring/Aftercare Other _____

Professional Credentials

Education Level _____ Degree _____ Name of Institution _____

License/Certification (attach photo copy) _____

Previous Prison Volunteer Experience: _____

References

List at least two persons who know you. If you are employed, one should be your employer/ supervisor. Other references may include a friend, co-worker, pastor, faculty advisor, etc. Either provide a letter of reference or let the person know that we will be contacting them by phone.

1. Name _____ Phone # _____ Relationship _____
2. Name _____ Phone # _____ Relationship _____

Have you ever been convicted of a criminal offense? Yes No

If yes, please explain briefly: _____

If you will be using your own car in this work, please provide the following:

Vehicle License State _____ Tag Number _____
Vehicle Insurance Company _____ Policy # _____

(Department Use Only)

Record of Comments from Contacts:

1. _____

2. _____

Additional Comments: _____

RETENTION SCHEDULE: Upon completion this form will become part of the volunteer's personnel file to be maintained locally two years past termination of the volunteer services.