



Virginia Peninsula Regional Jail

9320 Merrimac Trail, Williamsburg, Virginia 23185

Phone: 757-820-3900/Fax: 757-887-1849

Volunteer/Support Staff Application

(Please note: All information must be filled out. Failure to answer all questions may result in delayed processing of your application.)

Section 1: Personal Information

First Name: _____ Middle Name: _____ Last Name: _____

Street Address: _____ City: _____

State: _____ Zip: _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Place of Birth: _____

Contact Numbers:

Home: _____ Work: _____ Cell: _____

It is best to reach me at: Home Work Cell

Email Address (If none, please put N/A): _____

Sex: _____ Race: _____ Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____

Emergency Contact:

Full Name: _____ Relationship: _____

Contact Numbers:

Home: _____ Work: _____ Cell: _____

Section 2: Employment Information

Employer (If retired, please list your most recent former employer): _____

Length of Employment: _____

Street Address: _____ City: _____

State: _____ Zip: _____


Occupation: _____ Supervisor's Name: _____ Contact Number: _____

Section 3: Volunteer & Institutional Experience

Organization/Affiliation You Are Seeking to Volunteer/Provide Services For:

Requesting Admittance as: Volunteer Support Other

Previous Organizations/Affiliations: _____

Approved 6/14/21: 

Do you have previous experience working with adult and/or juvenile offenders? Yes No
 If yes, please supply information below:

Facility	Duties	Contact Person	Year

What was your reason for terminating your involvement with the above facilities?

To your knowledge, is there anyone currently incarcerated at VPRJ who is a family member or a friend? Yes No

Have you ever been charged or convicted of a crime other than a traffic violation? Yes No

If yes, please provide the charge, the outcome of the charge (dismissed, nolle prossed, convicted, etc.), and the date of the charge and of the conviction: _____

Are you fully vaccinated against COVID-19? Yes No

I, _____, of my own free will and without any offer of financial gain, offer my service to the Volunteer Services Program of the Virginia Peninsula Regional Jail. As a prospective member of the Volunteer Services Program, I acknowledge the need for, and agree to, the processing of a background investigation of my personal affairs. I further understand that this investigation may include all, or part of, the following:

- Criminal History Check
- Fingerprint Check
- Personality and Attitude Assessment
- Polygraph Examination

If I am accepted as a volunteer, I agree to abide by all of the rules, regulations, and policies of the Virginia Peninsula Regional Jail. I acknowledge my agreement to the above conditions, and certify that all of the information I have given is true and correct to the best of my knowledge, by affixing my signature below:

 Signature

 Date



Virginia Peninsula Regional Jail

ENTRANCE AGREEMENT

I, _____, hereby apply for admission to the Virginia Peninsula Regional Jail for the purpose of:

- Touring the facility
- Providing contract service as:
- Providing volunteer services as:
- Other:

I understand that a background investigation and / or criminal history record check may be conducted in connection with my application for admission and consent to such investigation and / or record check.

I will abide by those rules, regulations and conditions specified by the Virginia Peninsula Regional Jail and will fully comply with instructions of the jail staff while in the facility. This includes submission to search of my person and possessions on request. I fully understand the risk and responsibility associated with my admission to the Virginia Peninsula Regional Jail. I will conduct myself in a professional manner, mindful to the need to be security conscious at all times. I understand that during the conduct of my business in the facility, I may be exposed to privileged information pertaining to inmates and facility operations; I agree to treat such information as confidential and will not discuss matters pertaining to inmates; facility policies and procedures; or personnel outside the confines of the Virginia Peninsula Regional Jail unless authorized by the Superintendent. I agree to immediately notify a staff member should I become aware of information which is essential to the preservation of life, order, and security of the facility.

Should I be taken hostage, I understand that I will receive no preferential consideration because of my status or position. I further agree not to hold the Virginia Peninsula Regional Jail liable for accident or injury which I may incur by virtue of being admitted to the facility. I agree to accept full responsibility for my actions and any actions which may involve me while in the Regional Jail and understand that my entrance privilege may be curtailed or terminated at any time without cause.

Signature of Applicant

Date

Witnessed By

Date



Virginia Peninsula Regional Jail

VOLUNTEER AND SUPPORT STAFF TRAINING

DOCUMENTATION FORM

I, _____, have received the Volunteer/Support Staff services training and information in the below listed categories as indicated by my initials.

	Training	Staff
Rules for Volunteers		
Rules for Inmates in Programs		
Inmate Manipulation Training		
VPRJ Tour/Duties of Officers		

I have received a Volunteer Packet and agree to abide by its contents, including the Rules of Volunteers. If I am found in violation, I may be terminated as a Virginia Peninsula Regional Jail Volunteer. I accept full responsibility for my actions while a Virginia Peninsula Regional Jail Volunteer and understand that my entrance privilege may be suspended, curtailed, or terminated at any time.

Signed and dated in my hand:

Signature of Applicant Date

Witnessed By Date

PROGRAM STAFF USE ONLY

IV. Personal Interview

You will be interviewed by a member of the Programs Staff. Please answer these preliminary questions (use back of page if necessary):

List your reasons for desiring to work with inmates:

What do you feel are three strong traits that you have?

What does the term "inmate" mean to you?

Comments and impressions of interviewer:

Interviewed by: _____ Date: _____

Reviewed by: _____ Date: _____

Recommended Approval Disapproval Reasons

Criminal History check completed: Date _____ By _____

Comments: _____

