

## Benton County Jail Volunteer Application

**Print Full Name:** \_\_\_\_\_  
First Middle Last

**Date of Birth:** \_\_\_\_\_ **MN D/L #:** \_\_\_\_\_  
Month/Date/Year

**Home Address:** \_\_\_\_\_ **Cell/Home Phone:** \_\_\_\_\_  
\_\_\_\_\_ **Email:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Which jail program are you volunteering for?** \_\_\_\_\_

**Please explain why you want to become a volunteer:** \_\_\_\_\_  
 \_\_\_\_\_

**Who referred you to the Benton County Jail?** \_\_\_\_\_

**Have you ever been convicted of a crime?** \_\_\_\_\_ **If so, when?** \_\_\_\_\_

**Are you currently on probation or parole?** \_\_\_\_\_ **What County?** \_\_\_\_\_  
**If yes, Name of Agent:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**In case of an emergency, notify:**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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

**Relationship to you:** \_\_\_\_\_

**I hereby declare that the above information is true and correct to the best of my knowledge. Further, I authorize the facility to conduct a routine criminal history check; the result of such check will be held as private.**

\_\_\_\_\_ \_\_\_\_\_  
 Signature Date

## Benton County Jail Volunteer Agreement

I understand that to volunteer I must attend the mandatory 2 hour volunteer training session which covers The Volunteer Handbook, PREA (Prison Rape Elimination Act), Code of Ethics, Emergency Evacuation Plan, Interpersonal Communications and issues regarding to Jail policy, contraband and inmate behaviors. I understand that any violation of the rules may result in the suspension and/or termination of the privilege of volunteering at the Benton County Jail. I am aware of the nature of this facility and will take due caution in performance of my duties and will not hold this institution responsible for circumstances beyond our reasonable control.

The Volunteer Handbook and Code of Ethics will be available for you at the training in February and April, 2014. I do understand that if I do not attend this mandatory training I will not be able to volunteer at the Benton County Jail.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*Even if I only volunteer once a year, the mandatory training is still required.**

***Volunteers are the only human beings on the face of the earth who reflect this nation's compassion, unselfish caring, patience and just plain love for one another.***

***Erma Bombeck***

The Benton County Jail thanks you for volunteering and offering the  
Inmates' your time and talents!

*Mary Spiczka*

*Program Coordinator*

*Benton County Jail*

*320-968-8263*

*[mary.spiczka@co.benton.mn.us](mailto:mary.spiczka@co.benton.mn.us)*

***Training orientation is scheduled for:***

***Please mark on your calendars!***

\_\_\_\_\_  
**Anyone who has not attended one of these training sessions will have to be removed**