



Volunteer Approval Process (VAP) Miami-Dade County Corrections and Rehabilitation Department

The ability to volunteer and work with offenders incarcerated in the Miami-Dade County Corrections and Rehabilitation Department (MDCR) is contingent upon your approval as a registered volunteer/contractor. To become a registered volunteer/contractor, you must.

- Complete the volunteer/contractor application,
- Attached a copy of your Driver's license (ensure the image is enlarged by 25% and that all words and pictures are recognizable),
- Submit a letter, dated and signed on agency letterhead if you are representing an organization. If
 you are volunteering in your personal capacity, then you may submit a letter stating your
 intention to volunteer and briefly explaining the services you will provide. The letter must be
 signed and dated,

Please email your application to <u>Lizette.Torres-Serrano@miamidade.gov</u>.

After your application is completed and submitted for processing, you will be contacted by MDCR staff Ms. Lizette Torres-Serrano to schedule a brief appointment to review a short orientation video, and have your photo taken.

Reentry Services Bureau 3505 N.W. 107th Ave. Doral, Florida 33178

Thank you,

Dr. Ira Thomas, Bureau Commander Reentry Services Bureau (786) 263-6099

MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT Non-Staff/Volunteer Application Checklist

Applic	cant Name : DOB:				
	The following items are needed before the volunteer application is processed. Incomplete or illegible volunteer applications will be returned unprocessed until the necessary information is obtained:				
	A copy of the applicant's valid and legible driver licenses or Florida Identification Card				
	A current reference letter of good standing from a church or organization				
	Completed applications (no blank areas)				
	Signed Volunteers and Contractual Personnel Regulations and Application				

A volunteer applicant may be denied the opportunity to volunteer services with MDCR for any of the following reasons:

- a. An open misdemeanor or felony charge(s);
- b. A conviction or imprisonment in a federal or state institution(s), county jail(s), probation, parole or work release within 2 years prior to the date of application;
- c. A conviction of misdemeanor or felony charge(s) relating to a violation of Florida Statutes within 5 years prior to the date of application:

FS 393.135	Developmental Disabilities-Sexual Misconduct prohibited; reporting required; penalties;
FS 394.4593	Mental Health-Sexual Misconduct prohibited; reporting required; penalties;
FS 787.025	Luring or Enticing a Child;
FS 796.03	Procuring persons under the age of 18 for prostitution;
FS 800.04	Lewd or lascivious offenses committed upon or in the presence of persons less than 16 years of age;
FS 817.034	Florida Communications Fraud Act;
FS 825.1025	Lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled person;
FS 827.071	Sexual performance by a child; penalties;
FS 847.0133	Protection of minors; prohibition of certain acts in connection with obscenity; penalty.
FS 847.0135	Computer pornography; traveling to meet minor; penalties;
FS 847.0145	Selling or buying of minors; penalties;

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MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT Non-Staff/Volunteer Application Checklist

FS 893.135	Trafficking; mandatory sentences; suspension or reduction of sentences; conspiracy to engage in trafficking;	
FS 916.1075	Mentally deficient and Mentally ill Defendants-Sexual misconduct prohibited; reporting required; penalties;	
FS 794	Sexual Battery	
FS 893	Drug Abuse Prevention and Control	
FS 907.041	Pretrial detention and release;	

d. The Director or designee determines the applicant is a security risk or a possible disruption to departmental operations.

Checklist Verified By:		
Bureau/Facility Employee Name	Date	Bureau/Facility Employee Signature

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MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT

Volunteers and Contractual Personnel Regulations and Application

STEP 1: Applicant shall indicate the respective service bureau/unit and facility. Submit only 1 application per facility.				
Chaplaincy Services Unit	Faith Based Counselor		rvice Leader	
Rehabilitative Services Unit	1	AA CounselorLicensed Profess	■ NA Counselor ional	Mentor Other:
Contractor	■ FMB	■ ISB	☐ Other:	
Facility BCP M	WDC □ PTDC	☐ TGK	☐ Other	
STEP 2: Applicant shall complete the f				
In accordance with Florida Statute 119.071, "General exemption from inspection or copying of public records", a public agency in Florida may request a Social Security Number (SSN) from an individual only when it is specifically authorized by law to do so, or imperative for the performance of that agency's duties and responsibilities. The decision to provide your SSN is your option. However, declining to provide the SSN may delay the processing of your application/request/documents(s). If you provide your SSN, Miami-Dade Corrections and Rehabilitation Department (MDCR) will use it for identification and verification purposes only.				
	FLROC	ONAL INFORMATION		
Name:				
Maiden Name:	Sex:			
Home Address:			Length of Time:	
City:		State:	Zip Code:	
Driver License/Motor Vehicle State ID) #:		Social Security #:	
Telephone #:	Cell #:		Email:	
Referred by:				
Employer Name:			Length of Time:	
Employer Address:				
City:		State:	Zip Code:	
Employer Phone #:		Job Title:		
Supervisor Name:				
What service will you perform?				
Number of visits per week:				
Special Skills/Training:				
Languages Spoken:				
Have you ever been arrested or detained? If yes, please provide the date(s) and explain the circumstances and outcomes:				

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MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT

Volunteers and Contractual Personnel Regulations and Application

Have you ever been convicted of a crime?	If yes, please provide t	he date(s) and charge(s):	
Applicant Name (Print)		Signature	Date
STEP 3: Applicant must submit the following docu	umentation with the applicati	on.	
 Services Volunteers: A dated letter of recommendation with the organization's letterhead from their pastor, priest, rabbi, or house of worship leader indicating that they have been a member in good standing for a minimum of 1 year. 			
Submit an acceptable copy of identification (valid driver's license or moto	or vehicle state identification card.)	
Rehabilitation/Social Services Volunteers: • Letter identifying themselves, their position, a	and the service to be provide	ed.	
Licensed professionals must attach a copy or	f their license/certificate cred	dentials if volunteering in a professional c	apacity.
STEP 4: MDCR staff acknowledges reviewing the signing below.	ne application for completen	ess and ensuring the required document	tation is attached by
Applicant Interviewed and Form Verified by:			
Staff Name (Print)	Title/Badge #	Signature	Date
STEP 5: MDCR staff acknowledges completing a	criminal background check	by signing below.	
Criminal Background Check Conducted by:			
Staff Name (Print)	Title/Badge #	Signature	Date
STEP 6: MDCR staff assigns Pass Number			
Pass Number: Pa	ass Color:	Date Issued:	
Tuos Number.	333 00101.	Date 133ueu.	
Contractual personnel/vendors only - Once the application has received final approval/disapproval, it must be hand-delivered to Program Services Division; MDCR Headquarter.			
Volunteers and individuals contracted to work in a facility within the Miami-Dade Corrections and Rehabilitation Department (MDCR) shall adhere to the following Rules and Regulations at all times.			
		☐ Approve	
Facility Supervisor:		☐ Disapprove Date:	:
		☐ Approve	
		☐ Disapprove	

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Security and Internal Affairs Captain:

MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT Volunteers and Contractual Personnel Regulations and Application

- 1. Volunteers and contractual personnel shall not give anything to an inmate unless authorized by the Facility/Bureau Supervisor in writing.
- 2. Volunteers and contractual personnel shall not provide personal favors to any inmate, including preferential treatment to family members in the facility (nepotism).
- 3. Volunteers and contractual personnel shall treat inmates with dignity and respect.
- 4. Sexual relations with inmates, regardless of consensual status, are prohibited and subject to administrative and criminal sanctions.
- 5. Volunteers and contractual personnel shall abide by the rules and regulations of the facility and MDCR.
- 6. Volunteers and contractual personnel shall be properly dressed when entering a facility.
- 7. No food, newspapers, or any other outside items shall be allowed into the facility unless prior approval is given by the Facility/Bureau Supervisor.
- 8. If any volunteer or contractual personnel have questions as to conduct, within the facility, he/she shall contact the Facility/Bureau Supervisor, or the Shift Supervisor/Shift Commander.
- 9. Any problems with an inmate shall be reported to an MDCR staff member, Shift Supervisor/Shift Commander or Facility/Bureau Supervisor.
- 10. Volunteers and contractual personnel will be given a tour of the facility to familiarize the individual with the Shift Supervisor/Shift Commander area, evacuation routes, alarm pull stations, and locations of staff telephones.
- 11. Volunteers and contractual personnel shall not smoke in the facility, nor shall they introduce or give any tobacco products (cigarette, cigar, chewing tobacco, marijuana, including lighters, and matches) to an inmate(s).
- 12. There shall be no proselytizing (converting inmates from one belief to another) for any specific churches or denominations.
- 13. There shall be no teaching of church ordinances or sacraments without prior approval of the Chaplain's office.
- 14. Non-staff/volunteers shall not accept telephone calls from inmates at their personal residence or telephone.

I have been informed that Miami Dade Corrections and Rehabilitation Department's has a zero tolerance policy regarding: sexual assault, sexual harassment, "consensual sex" with correctional staff, and inmate-inmate sexual assault, in accordance with Prison Rape Elimination Act (PREA) Standards 115.32, 115.132, 115.232, 115.332 "Volunteer and Contractor Training," and FS 944.35 "Authorized use of force; malicious battery and sexual misconduct prohibited; reporting required; penalties." I have been provided a copy of the MDCR PREA Response Card. I will abide by all policies, directives, rules, and regulations including those that address preserving the confidentiality of records and other privileged information. I will also abide by the following laws:

Pertaining To Contraband: FS 951.22 County Detention Facilities: Contraband Articles - (1) It is unlawful, except through regular channels as duly authorized by the sheriff or officer in charge, to introduce into or possess upon the grounds of any county detention facility as defined in s. 951.23 or to give to or receive from any inmate of any such facility wherever said inmate is located at the time or to take or to attempt to take or send therefrom any of the following articles, which are contraband: (a) Any written or recorded communication. This paragraph does not apply to any document or correspondence exchanged between a lawyer, paralegal, or other legal staff and an inmate at a detention facility if the document or correspondence is otherwise lawfully possessed and disseminated and relates to the legal representation of the inmate. (b) Any currency or coin. (c) Any article of food or clothing. (d) Any tobacco products as defined in s. 210.25(12). (e) Any cigarette as defined in s. 210.01(1). (f) Any cigar. (g) Any intoxicating beverage or beverage that causes or may cause an intoxicating effect. (h) Any narcotic, hypnotic, or excitative drug or drug of any kind or nature, including nasal inhalators, sleeping pills, barbiturates, and controlled substances as defined in s. 893.02(4). (i) Any firearm or any instrumentality customarily used, or which is intended to be used as a dangerous weapon. (j) Any instrumentality of any nature which may be or is intended to be used as an aid in effecting or attempting to affect an escape from a county facility. (k) Any cellular telephone or other portable communication device as described in s. 944.47(1)(a)6. The term does not include any device that has communication capabilities which has been approved or issued by the sheriff or officer in charge for investigative or institutional security purposes or for conducting other official business. (2) A person who violates paragraph (1)(a), paragraph (1)(b), paragraph (1)(c), paragraph (1)(d), paragraph (1)(d), paragraph (

I understand that if I have questions, at any time, regarding this policy, I will consult with the Facility Supervisor or staff as directed. Please read the policy carefully to ensure that you understand the policy before signing this document.

I, the undersigned, have read and understand MDCR's rules and rethat MDCR reserves the right to terminate or cancel any visitation wit		lso understand
Applicant Name (Print)	Signature	Date



MIAMI-DADE CORRECTIONS AND REHABILITATION DEPARTMENT REENTRY SERVICES BUREAU



Volunteers and Contractual Personnel Application Emergency Contact Form

Volunteer/Contractor Name:	
Home Address:	
Primary Phone Number:	
Secondary Phone Number:	
Email Address:	
PRIMARY EMERGENCY CON	
Name:	
Relationship to Applicant:	
Home Address:	
Daytime Phone Number:	
Evening Phone Number:	
Email Address:	

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