



MONTEREY COUNTY, CALIFORNIA
SHERIFF'S OFFICE
 Proudly protecting the community since 1850.

**VOLUNTEER REFERRAL
 FORM**

1414 Natividad Road, Salinas CA 93906 ■ (831) 755-3700 ■ www.montereysheriff.org

All volunteers in the Custody Operations Bureau shall complete a background investigation in order to receive a volunteer clearance. The Chief Deputy of Custody Operations Bureau or his designee shall review the investigation and approve all clearances. The following guidelines will apply:

- Volunteers clearances shall not be issued to individuals who have been incarcerated in a county jail or penal institution or on probation or parole within the last two years, or who have a close association with a gang member or anyone involved in illegal activity.
- Volunteers shall possess a valid California Identification Card or California Driver's License.
- Volunteer cards will no longer be issued and will not be honored after January 1, 2002.
- Volunteer clearances shall be renewed annually through the Inmate Programs Coordinator. The volunteer's clearance shall be revoked when they are inactive in the program with which they are associated or upon demand by the Monterey County Sheriff's Office.
- Volunteers shall read and sign a Hostage Policy and Search Informed Consent Release.
- Only volunteers involved in programs that consist of academic or vocational courses, exercise and recreation, individual, family and/or social service programs and religious services shall be approved for clearance.
- **The proposed volunteer shall turn in this Volunteer Referral form to the Group Coordinator. A background investigation cannot be done without this form.**

VOLUNTEER INFORMATION	
Name	
Phone	
CA ID Card / CA Driver's License	

GROUP INFORMATION (Church / Organization / Program)	
Volunteer Group Name	
Phone	
Volunteer Group Coordinator	
Approval <i>Signature and Date</i>	

Group Coordinators shall provide the proposed volunteer with the Background Information sheet.

FOR SHERIFF'S OFFICE USE ONLY: Chief of Deputy Custody Operations Bureau Review		
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Signature Date
Reason for Disapproval		



**MONTEREY COUNTY JAIL
 RELIGIOUS VOLUNTEER APPLICATION**

Name:	
Address:	
City:	
Zip Code:	
Email Address:	
Home Phone:	
Cell Phone:	
Work Phone:	
Name of your sponsoring faith community:	
Address of your faith community:	
Phone Number:	
Name of its pastor:	

The above information will be verified. For one thing, the Chaplain needs to know you have your pastor's specific approval to join this ministry.

Signature of volunteer applicant

Date