SUGGESTED REFERENCE LETTER FORMAT

In most cases we have found that volunteers are approved by simply filling out the facility application form. However, there are some volunteers with either extensive arrest histories or one or two arrest that may potentially disqualify them from volunteer service.

If you fall in this category it may be prudent for you to write and submit a letter of reference with your application. Your facility H&I coordinator can help you with making this decision.

There are a number of topics you may want to include.

1. You may want to give a brief history. Where you were born, schools attended, etc.

2. You may want to describe your work history in recovery. Length of employment, amount of responsibility, progression of duties. You may want to make it as personal as possible, write how you’re a good employee.

3. You may want to write about your family. How you are a good father, wife, son, daughter, brother, grandfather, neighbor, etc.

4. You may want to include work or services you are involved with in the community such as school activities with your children, church, youth sports, volunteer work, etc.

5. If you are cleared at other facilities you may want to include that volunteer service work as well. You may want to include facility contact persons as needed.

6. You may have recovery stories, or achievements that may be worthwhile to include.

Some volunteers will choose to attach an explanation of their Department of Justice (DOJ) print out. This can be helpful for a couple of reasons. When accompanying the application it gives the authorities a sense of accountability and thoroughness, (they’re going to run the report anyway). Some applications are denied due to omission of a single arrest; providing the DOJ explanation in the report may keep this from happening. This also gives you a chance to review the report. There may be dispositions that are missing. You will then be able to explain what the disposition was. If the arrest report is incomplete your application may not be looked upon as favorable by the approving parties.

A good rule of thumb would be to make this a one to two page document. No more than two pages is recommended. You may choose to incorporate some of these suggestions in your letter. You are under no obligation to use any of this format. This document was created to help those with little or no experience with such a letter.

Please fill out the volunteer application for California State Prison Sacramento (CSP Sac)

If you have any questions please call Coordinator Robert L (408) 921-5668
**QUESTIONNAIRE - FOR VOLUNTEERS**

READ CAREFULLY. Please print or type. The information requested will be used by officials of the Department of Corrections to determine whether your application will approved or disapproved. The information will be maintained in a file by the Associate Warden/Business Services.

In accordance with the Privacy Act of 1974 (PL93-579). Providing your Social Security Number is optional. Any omission or falsification in this questionnaire may be cause to deny you entry as a volunteer. ATTENTION Self-Help Group Volunteers: You will be notified via your coordinator when you have been approved/denied.

**SELF HELP GROUP (NARCOTICS ANONYMOUS)**

1. YOUR NAME:                       FIRST                             MIDDLE                              LAST

2. HAVE YOU EVER USED ANOTHER NAME?        NO                 YES        If YES, please list.

3. BIRTH DATE (MONTH/DAY/YEAR) | AGE | BIRTHPLACE: | CITY | STATE | COUNTRY

4. DRIVER'S LICENSE NUMBER | IDENTIFICATION CARD, IF APPLICABLE | SOCIAL SECURITY NUMBER

5. PRESENT RESIDENCE ADDRESS (NUMBER AND STREET) | CITY | STATE | ZIP CODE

6. IF DIFFERENT THAN RESIDENCE ADDRESS, PRESENT MAILING ADDRESS | CITY | STATE | ZIP CODE

NOTE: Per Departmental Operations Manual, Section 31040.6.1.1, inmate relatives and inmate visitors shall not be considered nor allowed to become volunteers.

8. I VISIT OR HAVE VISITED, CORRESPONDED WITH, OR HAVE HAD AS A CRIME PARTNER AN INMATE IN PRISON INSTITUTION.

   ☐ NO  ☐ YES      if YES, complete item 8a. Attach additional sheet if more than two inmates.

8a INMATE’S NAME | NUMBER | INSTITUTION WHERE YOU VISIT INMATE | RELATION TO INMATE

9. Have you ever been arrested or convicted of a crime?  ☐ NO  ☐ YES

   If YES. Complete item 9a. List all arrests and/or convictions. Failure to list all arrests may result in denial of volunteering. Attach additional sheets if necessary.

9a OFFENSE | APPROXIMATE DATE | DISPOSITION: DISMISSED/PROBATION/JAIL/PRISON
10. Are you on Probation? Are you on Parole or Civil Addict Outpatient Status? Are you a former inmate?

☐ NO  ☐ YES  ☐ NO  ☐ YES  ☐ NO  ☐ YES

10a. If you are a former inmate discharged from supervision, you must have the prior written approval of the Warden Superintendent before volunteering will be permitted.

10b. If you are currently on probation, parole or civil addict outpatient status, you must submit a letter signed by your supervising agency and have the written approval of the Warden/Superintendent prior to volunteering.

11. Are you currently under any type of court-imposed program? If yes, please explain on another sheet and attach to this form.

☐ NO  ☐ YES

12. Do you have any type of mental implant or prosthesis? If yes, please attach a verifying statement from your doctor.

☐ NO  ☐ YES

I have read and understand the above information.

SIGNATURE * DATE *

TO BE COMPLETED BY INSTITUTION STAFF

☐ APPROVED  ☐ DISAPPROVED

NOTE: Return all applications to the Associate Warden/Business Services

Security clearance conducted by:

Print  Initial  Date

<table>
<thead>
<tr>
<th>NAME</th>
<th>TITLE</th>
<th>INSTITUTION</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ASSOCIATE WARDEN</td>
<td>CALIFORNIA STATE PRISON-SACRAMENTO</td>
<td></td>
</tr>
</tbody>
</table>
# VOLUNTEER SERVICE AGREEMENT

<table>
<thead>
<tr>
<th>Volunteer</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Name</td>
</tr>
<tr>
<td>Address</td>
<td>Address</td>
</tr>
<tr>
<td>Phone</td>
<td>Phone</td>
</tr>
<tr>
<td>SSA No.</td>
<td>SSA No.</td>
</tr>
</tbody>
</table>

Fill in SS# on line above

The following are the conditions accepted under this service agreement according to current policies, rules and regulations of the department:

1. Comply with policies, procedures, rules, and regulations of the Department of Corrections and Rehabilitation.
2. No salaries, wages or unemployment benefits will be received for the services rendered.
3. Use of state vehicle, when directed, with valid California Driver's License appropriate to the type of vehicle(s) operated. Participate in the State Defensive Training Program.
4. Use of state equipment and supplies, when required or directed to do so.
5. Employment as a volunteer is not effective until a Health Questionnaire and Volunteer Service Agreement is signed.

I understand my duties are as follows: To help facilitate Narcotics Anonymous meetings and follow the current policies, rules and regulations of the institution.

Period of agreement from: ________________ 20 ___ to: ________________ 20 ___

Reviewed and approved by appropriate authority:

Institution - ____________________________
COMMUNITY RESOURCE MANAGER DATE

Central Office - ____________________________
COORDINATOR, FINANCIAL RESOURCES DATE

* Paroles - ____________________________
REGIONAL ADMINISTRATOR DATE

* A copy of this document should be forwarded to Central Office, Division of Community Partnerships.
STATE OF CALIFORNIA
DEPARTMENT OF CORRECTIONS

PRIMARY LAWS, RULES, AND REGULATIONS REGARDING
CONDUCT AND ASSOCIATION WITH STATE PRISON INMATES
CDC 181 (Rev 5/98)

Individuals who are not employees of the California Department of Corrections (CDC), but who are working in and around inmates who are incarcerated within California's institutions/facilities or camps, are to be apprised of the laws, rules and regulations governing conduct in associating with prison inmates. The following is a summation of pertinent information when non-departmental employees come in contact with prison inmates.

1. Persons who are not employed by CDC, but are engaged in work at any institution/facility or camp must observe and abide by all laws, rules and regulations governing the conduct of their behavior in associating with prison inmates. Failure to comply with these guidelines may lead to expulsion from CDC institutions/facilities or camps.

   SOURCE: California Penal Code (PC) Sections 5054 and 5058; California Code of Regulations (CCR), Title 15, Sections 3285 and 3415

2. CDC does not recognize hostages for bargaining purposes. CDC has a "NO HOSTAGE" policy and all prison inmates, visitors, and employees shall be made aware of this.

   SOURCE: PC Sections 5054 and 5058; CCR, Title 15, Section 3304

3. All persons entering onto institution/facility or camp grounds consent to a search of their person, property or vehicle at any time. Refusal by individuals to submit to a search of their person, property or vehicle may be cause for denial of access to the premises.

   SOURCE: PC Sections 2601, 5054 and 5058; CCR, Title 15, Sections 3173, 3177, and 3288

4. Persons normally permitted to enter an institution/facility or camp may be barred, for cause, by the CDC Director, Warden and/or Regional Parole Administrator.

   SOURCE: PC Sections 5054 and 5058; CCR, Title 15, Section 3176 (a)

5. It is illegal for an individual who has been previously convicted of a felony offense to enter into CDC institutions/facilities or camps without the prior approval of the Warden. It is also illegal for an individual to enter onto these premises for unauthorized purposes or to refuse to leave said premises when requested to do so. Failure to comply with this provision could lead to prosecution.

   SOURCE: PC Sections 602, 4570.5 and 4571; CCR, Title 15, Sections 3173 and 3289

6. Encouraging and/or assisting prison inmates to escape is a crime. It is illegal to bring firearms, deadly weapons, explosives, tear gas, drugs or drug paraphernalia on CDC institutions/facilities or camp premises. It is illegal to give prison inmates firearms, explosives, alcoholic beverages, narcotics, or any drug or drug paraphernalia, including cocaine or marijuana.

   SOURCE: PC Sections 2772, 2790, 4535, 4550, 4573, 4573.5, 4573.6 and 4574

7. It is illegal to give or take letters from prison inmates without the authorization of the Warden. It is also illegal to give or receive any type of gift and/or gratuities from prison inmates.

   SOURCE: PC Sections 2540, 2541 and 4570; CCR, Title 15, Sections 3010, 3399, 3401, 3424 and 3425

8. In an emergency situation the visiting program and other program activities may be suspended.

   SOURCE: PC Section 2601; CCR, Title 15, Section 3383

9. For security reasons, visitors must not wear clothing that in any way resembles state issued prison inmate clothing (blue denim shirts, blue denim pants).

   SOURCE: CCR, Title 15, Section 3171 (b) (3)

10. Interviews with SPECIFIC INMATES are not permitted. Conspiring with an inmate to circumvent policy and/or regulations constitutes a rule violation that may result in appropriate legal action.

   SOURCE: CCR, Title 15, Section 3261.5, 3315 (3) (W), and 3177.

---

I HEREBY CERTIFY AND ACKNOWLEDGE I HAVE READ THE ABOVE AND FULLY UNDERSTAND THE IMPLICATIONS REGARDING MY CONDUCT AND ASSOCIATION WITH PRISON INMATES. I ALSO UNDERSTAND VIOLATION OF ANY OF THE ABOVE COULD RESULT IN EXPULSION FROM A CDC INSTITUTION/FACILITY OR CAMP WITH THE POSSIBILITY OF CRIMINAL PROSECUTION.

VISITOR'S NAME AND TITLE (Print) * VISITOR'S SIGNATURE * DATE SIGNED *

DISTRIBUTION: Original - Assistant Director, Communications Canary - Warden's Office Pink - Visitor