

**“VISITOR’S APPLICATION FORM”**

**WRITE PLAINLY – WE MUST BE ABLE TO READ ENTRIES – DO NOT WRITE OVER LETTERS**

**“MUST PRINT”**

INMATE’S NAME: \_\_\_\_\_

YOUR RELATIONSHIP TO INMATE: \_\_\_\_\_

YOUR LAST NAME: \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

MAIDEN NAME (SURNAME): \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY NO: \_\_\_\_\_

DRIVER LIC. NO./ID NO. \_\_\_\_\_ **STATE OF** DRIVER LIC./ID: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ WORK: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

**Have you ever been arrested?      (    ) YES              (    ) NO**

If so when? \_\_\_\_\_ Charge(s): \_\_\_\_\_

Outcome of case: \_\_\_\_\_

**Have you ever been convicted of a felony?      (    ) YES              (    ) NO**

If so when? \_\_\_\_\_ Charge(s): \_\_\_\_\_

Outcome of case: \_\_\_\_\_

**Are you on Probation or Drug Court, at this time?      (    ) YES              (    ) NO**

**I do hereby certify that the above information to be true and correct. I understand that any false information given is grounds for visitation privileges to be refused.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Approved: \_\_\_\_\_ Date: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

\_\_\_\_\_