

Montgomery County Correctional Facility
60 Eagleville Road, Norristown PA, 19403
Volunteer Application and Background Check Information
All information will be kept confidential.

This information is for security and emergency purposes only.

Please Print

1. Name (Last, First, M.I.) _____ Date of Birth: _____
Maiden Name if applicable: _____ Social Security #: _____
Address: _____ City/State: _____ Zip: _____
Home Phone: _____ Work Phone: _____
Affiliation: _____ Assignment: _____
2. Notify in case of Emergency: Name & Relationship: _____ - _____
Address: _____ City/State/Zip: _____ Phone: _____
3. Do you have any physical and/or psychological handicaps? ____ Meds.?: _____
If yes, explain: _____
4. Have you ever been confined in a federal, state, county or local prison? _____
If yes, explain: _____
5. How were you referred to us, and what volunteer service do you wish to provide? _____

The above information that I have provided is true and correct to the best of my knowledge. I understand that this information will be used in an NCIC background check. I understand that the Warden of Montgomery County Correctional Facility or his Designee, reserves the right to reject any application and/or refuse the applicant's admittance to the facility at any time without cause.

Signature: _____ Date: _____

NOTICE OF DANGEROUS CONDITIONS AND ASSUMPTION OF RISK

By my signature, I attest that I have been fully advised and clearly understand that the property I seek to enter as a volunteer is under the supervision of the Warden, the staff and under the control Montgomery County and that the property is a place of confinement for individuals who have been charged with crimes and are awaiting trial and/or have been convicted and are serving their sentences. I assume all risks which result from the normal operation of the Correctional Facility.

Signature: _____ Date: _____

RECEIPT AND AGREEMENT

I have received a copy of the volunteer handbook containing guidelines regarding my volunteer activities while at the correctional facility. I agree to abide by all rules and regulations contained in this handbook or otherwise provided.

Signature: _____ Date: _____