

Superintendent
Chris Brackett
Security and Operations Captain
Robert Hayden IV
Administrative Captain
Gwen Weisgarber

STRAFFORD COUNTY DEPARTMENT OF
CORRECTIONS
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Application for Volunteer Service at Strafford County DOC

Please Print

Name _____ **Date of Birth** _____

Gender : Male ____ **Female** ____ **SSN** _____

Former Maiden Names _____

Driver's License _____ **State Issued** _____

Address: _____ **City** _____ **State** ____

Phone Number: **Landline** _____ **Mobile** _____

Email _____

Emergency Contact _____ **Phone** _____

Program you are affiliated with: *Check*

Education	Internship	Counseling	Vendor
12 Step AA/NA	Medical Services	Spiritual	Other

Select your ethnic background

NCIC Check By: _____ Date: _____

Approved By: _____ Date: _____

Stafford County Department of Corrections
AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

Have you ever been convicted of a crime?

If Yes, Explain: _____

Have you ever been in custody at SCDOC for any reason? ____

Do you have any friends or family in custody at SCDOC? _____

If you answered "yes" to any of the above questions, please contact Director Locke or Chaplain Arnold Gustafson.

I, _____, do hereby authorize the Stafford County Department of Corrections to conduct a personal history investigation. I further authorize the release of information contained in records, reports and statements. Authorization is specifically granted to investigate and obtain records and information concerning the following:

1. Records of any criminal convictions that have not been annulled.
2. Motor vehicle driver history in this or any other state.
3. Record of any issued protective orders.

I hereby release said person(s), agencies or businesses that furnished or obtained such personal history information from any and all liability which may have been incurred as the result of this personal history investigation. A photocopy of this information release authorization will constitute as a valid document.

You are being asked the following questions to comply with the Federal Prison Rape Elimination Act (PREA):

Have you ever engaged in sexual activity in the community facilitated by force, the threat of force, or coercion?

Have you ever been convicted of domestic violence?

Have you ever been convicted of stalking?

Have you ever been convicted for sex offenses committed in the community?

Have you ever engaged in any type of sexual misconduct either in the workplace or in the community?

Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997).

Have you ever been investigated (not necessarily found guilty) for any type of workplace misconduct?

I understand it is my responsibility to immediately report any personal arrest, criminal conviction or civil judgment against me in writing to the superintendent or his/her designee.

If you answered "yes" to any of the above questions, please explain:

Print Name

Signature

Date