



# COOS COUNTY CORRECTIONS

Craig S. Zanni, Sheriff

## CLERGY CERTIFICATION APPLICATION//VISITATION

PLEASE PRINT AND FILL OUT COMPLETELY

Full Name: \_\_\_\_\_  
(Include Full Middle Name and any suffixes such as: Jr., Sr., II, or III)

Address: \_\_\_\_\_  
STREET/P.O. BOX CITY STATE ZIP

Phone #: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Email: \_\_\_\_\_

\*\*\*The following information is needed for a Criminal History Check (CCH)  
\*\*\*Please attach a copy of your driver's license or State ID\*\*\*

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB: \_\_\_\_\_ ODL#: \_\_\_\_\_

Have you ever been convicted of a crime? YES  NO   
(Exclude juvenile cases and minor traffic violations)

\*\*\*For Ordained//Licensed clergy only.\*\*\* Please attach a copy of proof of clergy: i.e. clergy license//or ordination papers\*\*\*

Name & Denomination: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Present Ministry: Full Time  Part Time  Retired  Volunteer

Bible College//Seminary Attended: \_\_\_\_\_

Address: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Please provide the following information for a person in leadership within the church / congregation you are currently serving and to whom you are accountable.

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

References: Please provide complete information of two people not related by blood or marriage having knowledge of your character, experience and/or ability.

1. \_\_\_\_\_  
NAME ADDRESS PHONE

2. \_\_\_\_\_  
NAME ADDRESS PHONE

My signature below indicates that the information provided on this form to the Coos County Sheriff's Office contains no misrepresentation or falsifications and is true and complete to the best of my knowledge. I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and can result in disqualification. I authorize the Coos County Sheriff's Office to make necessary and appropriate investigations to verify the information contained herein.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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### Admonition Agreement

1. I understand that access to the jail facility for civilian worker activities is a privilege granted to select citizens solely at the discretion of the jail commander and Sheriff. I understand that this privilege may be revoked immediately and permanently.

Initials: \_\_\_\_\_

2. I understand that supplying contraband is a Class C Felony punishable by up to 5 years in prison and a \$25,000 fine. I agree not to bring contraband into the jail facility. I understand that contraband is anything a person possesses that is prohibited by statute, rule or order from being in the facility. Contraband includes, but is not limited to: weapons, drugs/medications, tobacco, sharp objects, food, cell phones and ink pens. Unless approved by the jail commander, it also includes: books, magazines, newspapers, passing mail, notes, rosaries, religious articles, paper, or any messages to or from inmates.

Initials: \_\_\_\_\_

3. I understand that I may be asked to submit to a search of my person or property by jail staff before, during or after entry into the facility. I understand that I will be removed from the premises if I refuse such a request, and access to the facility may be revoked permanently.

Initials: \_\_\_\_\_

4. I understand that I am prohibited from disclosing ANY information to inmates concerning jail security, staff, procedures, prisoner transport, or any other information about the facility.

Initials: \_\_\_\_\_

5. I shall not make statements to the news media concerning the Coos County Sheriff's Office, or any inmate herein. I shall not make any photographic, vocal, or video recordings of any person at the jail, without the specific approval of the Sheriff's Office Public Information Officer.

Initials: \_\_\_\_\_

6. I understand that attire should be conventional and not unduly suggestive; and should not resemble inmate uniforms or create a security hazard due to its nature. I understand my County Identification will be clearly displayed on my person while in the facility.

Initials: \_\_\_\_\_

7. I shall immediately notify the jail commander or present supervisor of any information received, regarding plans to escape or to harm an individual, even if the information was learned in confidence.

Initials: \_\_\_\_\_

8. I understand to keep secret any plans to escape or to harm an individual may result in my arrest and charge with aiding and abetting a criminal act or conspiracy.

Initials: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\*\*\*SHERIFF'S OFFICE USE ONLY\*\*\*\*\*

Clergy Visit	<input type="checkbox"/>	Religious Volunteer	<input type="checkbox"/>	Other	<input type="checkbox"/>	_____
CMI	<input type="checkbox"/>	CCH	<input type="checkbox"/>	Jail Chaplain	<input type="checkbox"/>	
Approved	<input type="checkbox"/>	Denied	<input type="checkbox"/>			_____

Jail Administrator: \_\_\_\_\_

Date: \_\_\_\_\_



# **COOS COUNTY CORRECTIONS**

***Craig S. Zanni, Sheriff***

## **CLERGY CERTIFICATION APPLICATION//VISITATION**

### **JAIL POLICY**

#### **CLERGY VISITS**

Members of the clergy may visit an inmate without being on the inmate’s visitation list. Any clergy member that appears on an inmate’s visitation list must declare a visit as a ‘clergy’ visit; otherwise staff will consider the visit as a social visit with social visiting rules applying. Staff will treat any clergy that are related to the inmate as social visitors and not a member of the clergy. Staff will report any potential misuse of clergy visiting privileges to a jail command officer immediately.

**Clergy Visit Approval** – Clergymen who wish to be certified for clergy visits shall submit an ‘Application for Ministerial Pass’ to the Corrections Division. The application will be reviewed by the Jail Chaplain to determine the validity of the church, minister or pastor based on such proof as an official ministerial license, a letter from their ordaining authority, a clerical resume or other documentation as requested by the Jail Chaplain.

After review by the Jail Chaplain, the applicant will be checked through LEDS and NCIC. Applicants that are approved will be placed on the list of valid clergymen. The list will be maintained in the booking area and updated by the Jail Administrator and Jail Chaplain.

**Length and Number of Clergy Visits** – Clergymen may visit anytime during normal visiting hours. They may visit one or several inmates individually with regards to space availability and time. Clergy visits will not displace normally scheduled visits. Clergymen may visit male inmates only during the days and times male visitation is scheduled. Clergymen may visit female inmates only during the days and times scheduled for female visitation.

**Non-qualified Clergy and Lay Ministers** – Clergymen that do not qualify for the approved clergy list and Lay Ministers will be allowed visitation under the same procedures as normal visitors. They must be on the inmate’s visitation list and the visit shall count towards the inmate’s visitation limits.

#### **CERTIFICATION RENEWEL**

Once you have received clearance, the application must be renewed once every two (2) years in order to remain on the approved Clergy list.

#### **JAIL VISITATION**

**Times of Visitation** – Visitation times are as follows:

- 1. Males** – Sunday and Tuesday between the hours of 1:00 p.m. and 3:00 p.m.
- 2. Females** – Wednesday and Saturday between the hours of 1:00 p.m. and 3:00 p.m.

**NOTE:** *Visitations may not take place during meals; “lights out”; medical appointment; jail program class, or work assignment; or any time safety and security is involved without approval from a jail command officer or shift supervisor. Exceptions for attorney visits are addressed in this policy.*

#### **RELIGIOUS PROGRAMS**

**Times of Services** – Service/Program times are as follows:

**Prison Fellowship** – Friday 1800 – 2000 (6 p.m. to 8 p.m.) for blocks I, J, & K (allotted 40 minutes per block).

**The Gideons** - Saturday 0830 – 1030 (830 a.m. to 10 a.m.) for blocks F, G, H, I, J, & K (allotted 40 minutes per block).

**\*\*\*\*\*A professional visit with an inmate who is a relative is NOT permitted\*\*\*\*\***