

# BOONE COUNTY JAIL RULES AND REGULATIONS

## FOR VOLUNTEERS

Provide information for and subject yourself to a security clearance check.

Sign in and obtain clearance through your photo identification badge.

Contact with inmates at their individual cells is not permitted. All counseling and/or ministering shall be conducted in the multi-purpose room or such other place as the officer on duty may specify.

Any person entering the jail is subject to search.

Do not exchange personal gifts or favors with inmates. **This includes dropping any sort of property or money off for any inmate in the Boone County Jail.**

Do not accept any form of a bribe.

Do not accept phone calls from inmates or advise them to call you.

Perform duties in total sobriety. Do not enter the jail under the influence of intoxicants.

Do not bring any type of weapon or item declared as contraband into the jail without proper prior authorization.

Do not withhold information which in doing threatens the safety and security of the jail, its staff, visitors, inmates and the community. This would include any reports of any sexual assault or violations of PREA.

Do not engage in any form of business or profitable enterprise with inmates.

Do not mail out going letters for inmates.

Do not pass any notes or letters for inmates.

Advise the jail of any relative or friend that may be incarcerated at our facility.

## Liability Waiver

As with all jails the Boone County Jail is a dangerous place. We house dangerous felons in this facility which you will be exposed to. Even though we make every effort to ensure your safety it is impossible to guarantee your security. By entering this secure facility you are exposing yourself to such dangers as being taken hostage and assault. It is the policy of the Boone County Jail not to negotiate with hostage takers. If you have any questions regarding this policy please direct them to myself, Boone County Jailer Jason Maydak.

I, \_\_\_\_\_, understand the above liability and risks involved in entering the Boone County Jail.

\_\_\_\_\_  
Volunteer

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

**BOONE COUNTY JAIL VOLUNTEERS SECURITY INFORMATION**

Full Name: \_\_\_\_\_

Maiden and/or Alias: \_\_\_\_\_

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

City, State & Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

City and State of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Volunteer Organization: \_\_\_\_\_

Name of Jail Service: \_\_\_\_\_

Name of Jail Service Leader: \_\_\_\_\_

Email address: \_\_\_\_\_

Upon completion please return to the jail lobby window or mail to:

Lt. Christopher Gunkel or Lt. Anthony Brazier  
Boone County Jail  
P.O. Box 884  
Burlington, KY 41005

# Boone County Jail

## VOLUNTEER

### *PREA Training*

### **PREA & Boone County Jail**

The Prison Rape Elimination Act of 2003 (PREA), is a Federal law established to address the elimination and prevention of sexual assault and rape in correctional systems. PREA applies to all federal, state, and local prisons, jails, private facilities and community settings such as residential facilities. In response to PREA, the Boone County Jail has committed to a standard of ZERO-TOLERANCE for all incidents of sexual abuse or sexual harassment. This includes acts either by staff, other inmates, volunteers, contracted agents, or individuals having custody of or responsibility for the safety, security or care of inmates. Sexual abuse or assault of inmates by other inmates or staff is prohibited and subject to administrative discipline and criminal charges. Volunteers must be aware that unprofessional relationships will not be tolerated and these relationships are criminal and may be prosecuted under state and federal statutes.

### **Reporting Requirements and Acknowledgement**

All Boone County Jail employees, volunteers or contracted agents are required to report knowledge of any alleged sexual abuse or sexual harassment where staff, contract agents, volunteers or inmates are involved. Forms of reporting include a deputy jailer, a shift supervisor or Jailer. My signature acknowledges that I have received training on the Prison Rape Elimination Act of 2003 and understand that the Boone County Jail has a zero-tolerance policy for all forms of sexual abuse and sexual harassment. I have knowledge of all relevant policies that pertain to PREA and all the directives therein. I have had the opportunity to ask questions and receive feedback and am satisfied with my understanding of PREA and all its components as it relates to the Boone County Jail.

\_\_\_\_\_  
*(Volunteer Print Name)*

\_\_\_\_\_  
*(Volunteer Signature)*

\_\_\_\_\_  
*(Date)*

\_\_\_\_\_  
*(Instructor Signature)*

\_\_\_\_\_  
*(Date of training)*