

Thank you for your interest in becoming a volunteer for the Nevada Department of Corrections. By donating your time and skills, you will assist offenders and enhance the activities and programs of the Department. In order to assist you in becoming a volunteer, we need the following information:

VOLUNTEER TYPE: Circle one: • Education Teacher or Staff • Stude	ent Intern • Faith Based/Religious
● <u>Other</u> (specify)	
LEGAL Name: I	Date:
Facility(ies) at which you wish to volunteer?	
Organization Represented & Contact Person:	
Why do you want to volunteer?	
Who is <u>your</u> contact person/program director <u>within</u> the NDOC?	
Are you currently on any inmate's approved visitor list	t? If yes,
Inmate name:	NDOC #:
Inmate location:	
Educational Staff and Interns submit Documents to Northern Admir above)	nistration office in Carson City (address
Non-Educational Staff/Volunteers submit documents to Southern Administration office in Las Vegas (address above)	

The completed original of this document must be submitted in order to be processed, <u>copies are not</u> <u>acceptable</u>.