



# COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

518 828-3344 - Law Enforcement Dispatch  
 518 828-3324 - Corrections/Jail Reception  
 518 828-0601 - Admin/Civil Enforcement

85 Industrial Tract  
 Hudson, New York 12534-1500  
[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)  
**Emergency Call - 911**

518 828-2032 - Corrections/Jail Fax  
 518 828-9088 - Law Enforcement Fax  
 518 822-8477 - Crime Tip Hotline

## Corrections Division Volunteer Data Sheet

**Please Print – Enter data in last column.**

A.	Date Completed	Enter Date yyyymmdd.	
B.	Group Affiliation	AA, Catholic Ecumenical, People's Bible, 2 <sup>nd</sup> Baptist, ReEntry Columbia, NA, Rock Solid, Visiting Clergy, or specify.	
C.	Secular or Religious Group	Specify.	
D.	Title	Mr., Ms., Mrs., Rabbi, Dr., Reverend, etc.	
E.	First Name	Enter.	
F.	Middle Initial	Enter.	
G.	Last Name	Enter including Suffix (Sr., Jr. 3 <sup>rd</sup> , etc.)	
H.	Street Address or P.O. Box	Enter.	
I.	City/Post Office	Enter.	
J.	State	Enter.	
K.	Zip Code plus 4	Enter.	
L.	Home Phone	AC + Number as ###-###-####.	
M.	Cell Phone	AC + Number as ###-###-####.	
O.	Work Phone	AC + Number as ###-###-####.	
N.	Email Address We MUST have an Email Address	Personal or Work Email Address or Email Address of someone who receive for you.	
P.	Social Security Number	Enter as ###-##-####.	
Q.	Date of Birth	Enter as yyyymmdd.	
R.	Sex	Enter M or F.	
S.	Height	Enter Feet and inches e.g. 604, 510.	
T.	Weight	In pounds e.g. 120.	

DAVID P. BARTLETT, Sheriff



JOHN W. DAVI, Undersheriff

# COLUMBIA COUNTY SHERIFF'S OFFICE

## COLUMBIA COUNTY PUBLIC SAFETY FACILITY

518 828-3344 - Law Enforcement Dispatch  
518 828-3324 - Corrections/Jail Reception  
518 828-0601 - Admin/Civil Enforcement

85 Industrial Tract  
Hudson, New York 12534-1500  
[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)  
**Emergency Call - 911**

518 828-2032 - Corrections/Jail Fax  
518 828-9088 - Law Enforcement Fax  
518 822-8477 - Crime Tip Hotline

U.	Eye Color	Blue, Green, Hazel, Brown, etc.	
V.	Hair Color	Blond, White, Brown, Red, Bald, etc.	
W.	Blood Type	A+, A-, B+, B-, AB+, AB-, O+, O-	
X.	Sex Abuse Conviction	Yes or No. Explain in Y.	
Y.	Details of Sex Abuse Arrest	Explain. Attach separate sheet if necessary. Or enter N/A.	
Z.	Emergency Contact Name	Last, First, MI.	
AA.	Emergency Contact 911 Address	911 Number and Street name City, State, Zip.	
AB.	Emergency Contact Phone	Enter as AC+number ###-###-####.	

I affirm under the penalty of perjury that the information provided is true to the best of my knowledge.

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

**ATTACH A PHOTO COPY OF NEW YORK STATE DRIVER'S LICENSE OR GOVERNMENT PHOTO ISSUED ID. CLERGY – ATTACH PHOTO COPY OF CREDENTIALS.**

### For Official Use Only:

AC.	PREA Acknowledgement Date	Enter the Date of the PREA Agreement Signature as yyyyymmdd.	
AD.	Date of Background Check	Enter the date the investigation was completed.	
AE.	Results of the Background Check	Recommendation based upon the background check.	
AF.	Date Training Completed	Enter as yyyyymmdd.	
AG.	Status	Active Volunteer Conducting program. Visiting Clergy. Service Provider. Rejected as a Volunteer.	

DAVID P. BARTLETT, Sheriff



JOHN W. DAVI, Undersheriff

# COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

**518 828-3344** - Law Enforcement Dispatch  
**518 828-3324** - Corrections/Jail Reception  
**518 828-0601** - Admin/Civil Enforcement

85 Industrial Tract  
Hudson, New York 12534-1500  
[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)  
**Emergency Call - 911**

**518 828-2032** - Corrections/Jail Fax  
**518 828-9088** - Law Enforcement Fax  
**518 822-8477** - Crime Tip Hotline

AH	Remarks	If needed. Explain why if the applicant was rejected due to screening.	
AI	Photo	Indicate if a photo is linked to the Spread Sheet.	

DAVID P. BARTLETT, Sheriff



JOHN W. DAVI, Undersheriff

## COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

**518 828-3344** - Law Enforcement Dispatch

**518 828-3324** - Corrections/Jail Reception

**518 828-0601** - Admin/Civil Enforcement

85 Industrial Tract

Hudson, New York 12534-1500

[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)

**Emergency Call - 911**

**518 828-2032** - Corrections/Jail Fax

**518 828-9088** - Law Enforcement Fax

**518 822-8477** - Crime Tip Hotline

### The Prevention of Sexual Abuse in Jail

I have received and reviewed the information on the Prevention of Sexual Abuse in Jail. I understand that the Columbia County Jail has a ZERO TOLERANCE POLICY in regard to all forms of sexual abuse. I understand while in contact with an inmate that an inmate could make a report of abuse to me. I also understand that it is my duty and responsibility and agree to report this abuse immediately to staff or other appropriate authority and to cooperate in further investigation of the alleged abuse. The only exemption to the reporting clause herein is that it is considered privileged communication by legal definition.

---

Print Name and Title

---

Signature

---

Date

DAVID P. BARTLETT, Sheriff



JOHN W. DAVI, Undersheriff

## COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

**518 828-3344** - Law Enforcement Dispatch

**518 828-3324** - Corrections/Jail Reception

**518 828-0601** - Admin/Civil Enforcement

85 Industrial Tract

Hudson, New York 12534-1500

[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)

**Emergency Call - 911**

**518 828-2032** - Corrections/Jail Fax

**518 828-9088** - Law Enforcement Fax

**518 822-8477** - Crime Tip Hotline

### Agreement to Enter the Facility

I understand that I must successfully pass through the metal detector without setting off the alarm EACH and every time I visit the facility. I understand that if I fail to pass through successfully, I will NOT be allowed into the facility.

---

Print Name & Group Affiliation

---

Signature

---

/ /  
Date

DAVID P. BARTLETT, Sheriff



JOHN W. DAVI, Undersheriff

# COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

518 828-3344 - Law Enforcement Dispatch  
518 828-3324 - Corrections/Jail Reception  
518 828-0601 - Admin/Civil Enforcement

85 Industrial Tract  
Hudson, New York 12534-1500  
www.columbiacountysheriff.us  
Emergency Call - 911

518 828-2032 - Corrections/Jail Fax  
518 828-9088 - Law Enforcement Fax  
518 822-8477 - Crime Tip Hotline

## Release – Criminal Record Check

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

I, \_\_\_\_\_ A/K/A/ \_\_\_\_\_  
Print Print

Date of Birth \_\_\_\_\_

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

Give consent for the Columbia County Sheriff's Office to release information regarding my Criminal Record.

\*This criminal record check applies to the Columbia County Sheriff's Office ONLY.

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

A/K/A = Also Known As: Please include any other names you are now known or have used in the past, including but not limited to "street" names, nicknames, married names and maiden names.



# COLUMBIA COUNTY SHERIFF'S OFFICE

COLUMBIA COUNTY PUBLIC SAFETY FACILITY

518 828-3344 - Law Enforcement Dispatch  
518 828-3324 - Corrections/Jail Reception  
518 828-0601 - Admin/Civil Enforcement

85 Industrial Tract  
Hudson, New York 12534-1500  
[www.columbiacountysheriff.us](http://www.columbiacountysheriff.us)  
Emergency Call - 911

518 828-2032 - Corrections/Jail Fax  
518 828-9088 - Law Enforcement Fax  
518 822-8477 - Crime Tip Hotline

## Instructions

1. Legibly complete the **Volunteer Data Sheet**
  - **Name:** Last Name, First Name, Middle Name
  - **Group Affiliation:** Enter the name of the existing organization conducting a correctional facility program that you will join as a volunteer. If not affiliated with an existing program, enter the service, church name or other organization.
2. After reviewing the **Prison Rape Elimination Act (PREA)** pamphlet provided to you, complete and sign the section titled "**The Prevention of Sexual Abuse in the Jail**". This topic will be covered in detail during training.
3. Complete the "**Agreement to Enter the Facility**" by printing your name and group affiliation. Sign and date this section also. You will receive training on how to pass through the metal detector.
4. Complete and sign the "**Release – Criminal Record Check**" form.
5. Obtain a photocopy of your valid driver's license or valid DMV photo identification and attach to the completed forms.
6. **Clergy or Official Religious Leader:** Photocopy your identification confirming that you are an official minister in your religion and attach the photocopy to the completed forms.
7. Prepare an envelope addressed as follows:

**Lieutenant William Hilscher**  
**Columbia County Jail**  
**85 Industrial Tract**  
**Hudson, N.Y. 12534**

Enclose the completed documents described in one through six above and send the sealed envelope via U.S. Mail OR deliver it to the Columbia County Jail window at the above address. Please do not fold the completed reports and photocopied document(s).

8. You may also scan the completed documents and attach them to an email to:  
[william.hilscher@columbiacountysheriff.us](mailto:william.hilscher@columbiacountysheriff.us)