



INDIANA DEPARTMENT OF CORRECTION

Application for Visiting Privileges

State Form 14387 (R2/7-08)

INSTRUCTIONS – 1. Please Print 2. All spaces must be completed 3. Sign the application 4. Return application to the offender's counselor as indicated at the bottom of this document 5. Do not attempt to visit until the offender notifies you that your application was approved 6. Submit legible copy of photo ID (16 & older) 7. Children 15 & under must submit a legible copy of their birth certificate. 8. A separate application must be submitted for each applicant, including children.

Offender Information	Offender Name:	DOC Number
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The above named offender has requested that you be added to his/her list of approved visitors. In order for this to be done, you must follow the directions above and YOU (or parent/guardian) must properly complete this application and return it to the facility to the attention of the counselor of the offender's housing unit (do not return it to the offender). If you are approved to visit, it will be the offender's responsibility to notify you and then send to you a copy of the rules for visitation. We DO NOT give out this information by telephone.

Applicant's Name: Last, First, Middle	Current Address (Must match ID Used)	
Driver's License Number & State of Issue #: State:	State ID No. & State of Issue or other approved ID No./Type #: State: Type:	Race
Date of Birth (MM/DD/YYYY):	Telephone Number with area code:	
Are you related to this offender? <input type="checkbox"/> Yes <input type="checkbox"/> No	If related, how (must be immediate family)?	

Immediate family limited to mother, father, siblings, spouse, children, grandparents, grandchildren, including those with "step", "half", or adoptive relationships, aunt, uncle and those persons with the same relationship to the offender's spouse. Immediate family and 2 friends, up to a maximum of 12 persons will be allowed on the offender's contact list.

Applicant under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Are you on parole/probation? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Do you have any pending charges against you? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Have you ever been incarcerated in a penal facility in any state or any country? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list where and why here. Where: _____ Why: _____ (Attach additional sheet if necessary)	

If the response to any question above marked (*) is "yes", you must submit a special request for visitation privileges to the Superintendent of the appropriate facility. If you are on parole/probation, you must also submit written approval from your Parole/Probation Officer.

Are you currently or formerly an employee of the Indiana Department of Correction or any Correctional facility in any state? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", please give the location and the last date of employment: Location: _____ Last Date Employment: _____	
Are you on any other offender's visiting list? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes": Relationship: _____ Offender DOC#: _____ Name: _____	Are you now or have you ever been a volunteer at an IN correctional facility? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes": Facility: _____ Volunteer Type: _____

ANY FALSIFICATION OF INFORMATION ON THIS APPLICATION FOR VISITATION PRIVILEGES WILL RESULT IN IMMEDIATE SUSPENSION OF VISITATION PRIVILEGES AT ALL INDIANA DEPARTMENT OF CORRECTION FACILITIES.

By your signature below you are indicating that:

- You have read, understand and agree to abide by all rules set forth by the Department of Correction in order to visit any offender at any Department facility.
- You understand that you, your property and your vehicle while on Department of Correction grounds are subject to search, including frisk searches and the use of metal detectors, ion scanning equipment and/or search dogs. You WILL be searched before being allowed to enter the visiting area. Refusal to submit to a search will result in you not being allowed to visit and you will be required to leave the facility immediately. Such refusal may restrict your ability to visit any offender in any Department of Correction facility.
- You understand that a criminal warrants check will be performed on you before you are allowed to visit
- You understand that possession of any firearms, weapons, knives, ammunition, narcotics, controlled substances, alcoholic beverages, marijuana, tobacco or tobacco related items or electronic devices, including cellular telephones, pagers or other communication devices is strictly prohibited. Medication and money/currency may only be possessed in accordance with Department rules.
- You understand that visits are monitored and videotaped.
- You certify that all of the information provided on this application is true, correct and as up to date as possible to the best of your knowledge and that you will notify the facility of any changes of address, telephone number, etc..

Applicant's Signature:	Date (MM/DD/YYYY):	
Signature of Parent/ Legal Guardian (if under 18):	Date (MM/DD/YYYY):	
FOR OFFICE USE ONLY	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature of reviewing authority (Legible please):
Return To:	Facility Name & Address:	Attention Counselor of Housing Unit



TO: SUPERINTENDENT

FACILITY:

OFFENDER _____ NUMBER

NAME OF MINOR CHILD(REN) AND AGE

This document authorizes that the above name child(ren) is (are) authorized to visit the above named offender who is related to them as _____. As the parent/legal guardian of this/these child(ren),

I hereby authorize the child(ren) to accompany the following person during this visit

(Relationship)

I am fully aware that the above named offender is housed in a correctional facility and that any visits will occur within the correctional facility and in accordance with the facility's offender visitation procedures.

Signature of Parent/Legal Guardian

Date

Printed name of Parent/Legal Guardian

Before me, a Notary Public in and for said County and State personally appeared

who acknowledged the truth of the statements in the foregoing affidavit on this ____ day of _____, 20

Signature of Notary Public

County of residence

Printed name of Notary Public

Commission expiration date



OFFENDER TELEPHONE LIST

State Form 49014 (R / 10-99)

Name of Offender	DOC number	PIN number	Facility
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Housing unit

I am requesting that the following names and telephone numbers be placed on my telephone list. I state that to the best of my knowledge the persons on this list are agreeable to receiving my calls and that telephone calls to those persons will be made for purposes permitted under Department of Correction policies and procedures and facility rules. I understand that I may submit no more than twenty (20) names without the approval of the Facility Head or designee.

FIRST & LAST NAME	RELATIONSHIP	STREET ADDRESS	CITY, STATE, ZIP CODE	AREA CODE & NUMBER
1.				
2.				
3.				
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19.				
20.				

I understand that I will be notified by staff if any of the telephone numbers listed are not placed on my telephone list.

Signature of offender	Date (month, day, year)
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LIST OF APPROVED VISITORS
 State Form 40826 (r 2 / 8-88)

HOUSING LOCATION

INSTRUCTIONS: The Staff will fill out this form listing all approved visitors for the offender. This form is to be completed when the offender arrives at the facility / institution. Changeable items (i.e., addresses), should be done in pencil.

OFFENDER'S NUMBER / PENDLETON JUVENILE CORRECTIONAL FACILITY			OFFENDERS NAME		
NAME	AGE	ADDRESS (street/No.)	CITY AND STATE	TELEPHONE	APP/DATE
Father					
Mother					
Step-Father					
Step-Mother					
Spouse					
Ex-Spouse					
Son(s)					
Daughter(s)					
Brother(s)					
Sister(s)					
Grandmother(s)					
Grandfather(s)					

NAME	AGE	ADDRESS	CITY AND STATE	SEX	RELATION	TELEPHONE	APP/DATE
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PENDLETON JUVENILE CORRECTIONAL FACILITY

9310 South State Road 67, Pendleton, Indiana 46064 (765) 778-3778

VISITING REGULATIONS HANDOUT

The Pendleton Juvenile Correctional Facility is located in Pendleton, Indiana on State Road 67 approximately twenty-five (25) miles north east of Indianapolis and approx. 6 miles south of Anderson driving directions located on Department of Correction internet site www.in.gov/idoc. The Pendleton Juvenile Correctional Facility encourages visiting and staff recognizes that through visitation, offenders are able to continue contacts with their family and friends that shall aid them while they are incarcerated and shall prove indispensable to them after they are released. Visitation with offenders committed to the Indiana Department of Correction is a privilege. Although the facility encourages visitation, security and the physical layout make it necessary to establish the following regulations:

1. All visitors must complete an Application for Visiting Privileges, be listed on the offender's visiting list, (do not contact the facility to see if you are on an offender's visiting list, this information shall not be given over the telephone) and must be subject to a criminal background check through IDACS. Falsifying or providing incorrect information on an application shall result in the applicant being banned from all correctional facilities for a period of one (1) year.
2. All visitors aged sixteen (16) and over shall be required to produce positive picture identification before entry into the visiting area. The only forms of identification accepted by the Department are:
 - a. A valid driver's license from the state of residence
 - b. A valid state photo identification card from the state of residence
 - c. A valid photo military identification card (active duty only)
 - d. A valid passport

Exceptions to this requirement may be granted only by the Superintendent or designee. Visitors under the age of eighteen (18) must be accompanied by a parent or legal guardian at all times while on the facility grounds. This procedure does not apply to an offender's spouse who is under the age of eighteen (18) years. Based upon a request from the offender, the Superintendent may grant an exception to this requirement. In cases where a parent or guardian cannot accompany a minor child, the Superintendent may approve another responsible adult to accompany the child during a visit. The minor child's parent or legal guardian must sign and have notarized State Form #48965, "Authorization for Minor Child to Visit", prior to actual visit.

3. Ex-offenders are not permitted to visit unless approved by the Superintendent. Such visits shall be limited to immediate family members only. To obtain approval, the ex-offender must write the Superintendent requesting to visit and list the person(s) they wish to visit. Persons on parole or probation must include a written recommendation from their Probation or Parole Officer to the Superintendent. Ex-employees of the Department of Correction and current Department of Correction employees must have written approval from the Facility Head and the Commissioner before they may visit an offender.
4. Offenders shall be permitted to receive one (1) visit per week on one of the designated visiting days.

Sunday Morning:	Odd numbered units	8:30 A.M. to 11:00 A.M.
Sunday Afternoon:	Even numbered units	1:00 P.M. to 3:15 P.M.
Sunday Evening:	Odd numbered units	6:30 P.M. to 8:00 P.M.
Monday Evening:	Even numbered units	6:30 P.M. to 8:00 P.M.
Tuesday Evening:	Odd numbered units	6:30 P.M. to 8:00 P.M.
Thursday Evening:	Even numbered units	6:30 P.M. to 8:00 P.M.
Friday Evening:	Odd number units	6:30 P.M. to 8:00 P.M.
Saturday Morning:	Even numbered units	8:30 A.M. to 11:00 A.M.
Saturday Afternoon:	Odd numbered units	1:00 P.M. to 3:15 P.M.
Saturday Evening:	Even numbered units	6:30 P.M. to 8:00 P.M.

Exception for parent orientation participants. EXTRA VISITS THAT DO NOT COUNT FOR THE ONE (1) VISIT A WEEK ARE AS FOLLOWS – LAST TUESDAY OF EACH MONTH

January 26, 2010	February 23, 2010	March 30, 2010
April 27, 2010	May 25, 2010	June 29, 2010
July 27, 2010	August 31, 2010	September 28, 2010
October 26, 2010	November 30, 2010	December 28, 2010

Odd or Even Numbered Units: 8:30 A.M. to 11:00 A.M. or 1:00 P.M. to 3:15 P.M.

HOLIDAYS: VISITATION TIME IS 8:30 A.M. TO 11:00 A.M. or 1:00 P.M. to 3:15 P.M.

New Year's Day	Friday	January 01, 2010	Odd or Even Numbered Units
Martin Luther King, Jr. Day	Monday	January 18, 2010	Odd or Even Numbered Units
Good Friday	Friday	April 02, 2010	Odd or Even Numbered Units
Primary Election Day	Tuesday	May 04, 2010	Odd or Even Numbered Units
Memorial Day	Monday	May 31, 2010	Odd or Even Numbered Units
Independence Day	Sunday/Monday	July 4 & 5, 2010	Odd or Even Numbered Units
Labor Day	Monday	September 06, 2010	Odd or Even Numbered Units
Columbus Day	Monday	October 11, 2010	Odd or Even Numbered Units
General Election	Tuesday	November 02, 2010	Odd or Even Numbered Units
Veteran's Day	Thursday	November 11, 2010	Odd or Even Numbered Units

Thanksgiving Day	Thursday	November 25, 2010	Odd or Even Numbered Units
Lincoln's Birthday (State Holiday from February)	Friday	November 27, 2010	Odd or Even Numbered Units
Washington's Birthday (State Holiday from February)	Thursday/Friday	December 23/24, 2010	Odd or Even Numbered Units
Christmas Day	Friday/Saturday	December 24/25, 2010	Odd or Even Numbered Units

5. The maximum number of individuals allowed to visit at one session is four (4). Children under the age of one (1) year shall not be counted as one of the four approved visitors and only two (2) children under the age of twelve months shall be permitted per visit.
6. Visiting time is one (1) hour in length. Additional time may be granted for those traveling over one-hundred (100) miles, dependent on room availability. Visits may be terminated prior to the designated times to accommodate more visitors, should the situation arise. Special visits shall be granted on a case by case basis with prior approval from the Superintendent or designee. Special visits may include; visits on other than designated visiting days and visitors approved for one visit only.
7. All persons coming to the facility are expected to conduct themselves in a polite and orderly manner. Persons who are intoxicated or appear to be under the influence of drugs/alcohol shall not be permitted to visit. Visitors that seriously impaired through drugs or alcohol shall be reported to the Indiana State Police immediately to ensure they do not operate a motor vehicle. All visitors shall be required to submit to a search of their person and property. Frisk searches of a visitor's person shall be conducted by staff of the same gender as the visitor. Additionally, visitors shall be subject to additional searches using metal detectors and ION Scanning equipment. Visitors in the waiting area or visiting room may be search by trained K-9's at any time while in the facility. Any visitor who refuses to be searched shall be advised that they shall not be permitted to enter the facility visiting area. Visitors are to ensure they lock their vehicles while on State property.
8. All visitors shall be asked, "Do you have in your possession any firearms, weapons, knives, ammunition, narcotics, medication, controlled substances, alcoholic beverages, marijuana, tobacco or tobacco related items, money/currency, cameras, video or audio recording equipment or electronic devices including cellular telephones, pagers or other communication devices"? Additionally, all visitors are asked, "Are you or have you ever been an employee of the Department of Correction?"
9. In addition, visitors shall be asked if they have any disabilities that shall require special accommodations. Accommodations may include allowing the visitor to enter the facility with a service dog (seeing eye dog, etc.).
10. Visitors may only take a \$20.00 in change per visiting adult. Change must be carried in small clear Ziploc type baggie. Other permissible items are a Driver's License, one (1) key to vehicle, wedding/engagement rings, pierced earrings, (no other body jewelry) handkerchief/kleenex, medical I.D. bracelet/necklace, and infant care items (one [1] receiving blanket, one [1] clear bottle, one (1) diaper, and one [1] pacifier). All other items shall be placed in the visitor's locker. Nitro pills (small amount), oxygen tanks, canes, wheelchairs, crutches may be taken into the visiting room upon inspection by the Shakedown Officer.
11. Visitors shall not be permitted to re-enter the visiting area once they leave.
12. Visits shall not be split between visitors. Once a visit starts, no one else shall be permitted to enter the visit. Visitors shall only visit the designated offender. No visiting between other offenders.
13. Lockers shall be provided for the visitor's personal effects. PLEASE BEAR IN MIND THAT SUBSTANTIAL SUMS OF MONEY OR OTHER VALUABLES SHOULD NOT BE BROUGHT TO THE FACILITY. THE STATE OF INDIANA, DEPARTMENT OF CORRECTION, AND THE PENDLETON JUVENILE CORRECTIONAL FACILITY ASSUMES NO RESPONSIBILITY OR LIABILITY FOR ANY ARTICLES PLACED IN LOCKERS IN THE FACILITY OR SECURED IN AUTOMOBILES IN THE PARKING LOT. VISITORS ENTER THE VISITING AREA AT THEIR OWN RISK. THE DEPARTMENT OF CORRECTION SHALL NOT ASSUME ANY LIABILITY FOR ANY INJURIES OR DAMAGE OR LOSS OF PROPERTY AS A RESULT OF A PERSON ENTERING A VISITING AREA OR ANY OTHER AREA WITHIN THE FACILITY. NO PERSONAL EFFECTS SHALL BE HELD/SECURED FOR VISITORS AT THE MAIN CONTROL AREA. CELL PHONES MUST BE SECURED IN VISITOR'S VEHICLE. NO CELL PHONES ARE ALLOWED TO BE STORED IN THE WAITING ROOM LOCKERS.
14. INDIANA STATUTES: A person who, without the prior authorization of a the person in charge of a penal facility, knowingly or intentionally: (1) delivers, or carries into the penal facility with intent to deliver, an article to an offender of the facility, or (2) carries or receives with intent to carry out of the penal facility, an article(s) from an offender of the facility, commits trafficking with an offender, a Class A Misdemeanor. However, the offense is a Class C Felony if the article is a controlled substance or a deadly weapon (IC 35-44-3-9).
15. IC 35-44-3-9 states:
 - (b) Except as provided in subsection (d), a person who, without the prior authorization of the person in charge of a penal facility or juvenile facility knowingly or intentionally: delivers, or carries into the penal facility or juvenile facility with intent to deliver, an article to an inmate or child of the facility;
 - (1) carries, or receives with intent to carry out of the penal facility or juvenile facility, an article from an inmate or child of the facility; or
 - (2) delivery, or carries to a work site with intent to deliver, alcoholic beverages to an inmate or child of a jail work crew or community work crew; commits trafficking with an inmate, a Class A misdemeanor,
 - (c) If the person who committed the offense under subsection (b) is an employee of:
 - (1) the department of correction; or

- (2) a penal facility; and the article is a cigarette or tobacco product (as defined in IC 6-7-2-5), the court shall impose a mandatory five thousand dollar (\$5,000) fine under IC 25-50-3-2, in addition to any term of imprisonment imposed under IC 35-50-3-2,

(d) The offense under subsection (b) is a Class C felony if the article is:

- (1) a controlled substance; or
(2) a deadly weapon.

A person who commits a Class A misdemeanor shall be imprisoned for a fixed term of not more than one (1) year, in addition, he/she may be fined not more than five thousand dollars (\$5,000), (IC 35-50-3-2). A person who commits a Class C felony shall be imprisoned for a fixed term of four (4) years, with not more than four (4) years added for aggravating circumstances or not more than two (2) years subtracted for mitigating circumstances. In addition, he/she may be fined not more than ten thousand dollars (10,000). (IC 35-50-2-6).

It is a Class C infraction for a person to furnish an alcoholic beverage to a person confined in a penal facility. It is unlawful, also, for a person who has charge of a penal facility to knowingly permit a prisoner confined within his/her jurisdiction to receive an alcoholic beverage unless it has been prescribed by a physician as medicine for the prisoner (IC 7-1-5-10-16) or unless it is distributed as sacramental wine for a religious purpose by a minister, priest, or rabbi, (IC7-1-1-2-3) (a) (3).

A person who commits a Class C infraction may be fined not more than five hundred dollars (\$500) (IC34-28-5-4) (c).

16. All visitors must be appropriately attired when visiting. Listed below is the dress code for visiting.

- a. Visitors may wear shorts; however, the shorts may not be more than two (2) inches above the knee.
- b. Visitors are not permitted to wear halter tops, tube tops, swimsuit or bodysuit as a top or low-cut revealing tops. All visitors must wear a shirt/blouse with sleeves.
- c. Undergarments (bra/underwear) must be worn.
- d. Dress or skirt hemlines are not permitted if more than two (2) inches above the knees. Revealing slits or kick pleats exposing more than two (2) inches above the knees shall be pinned.
- e. Sheer blouses are permitted if worn with a camisole.
- f. Head attire is permitted to be worn only if it is required as part of a religious practice or medical condition. This item shall be subject to being searched.
- g. Shoes must be worn; this includes children, with the exception of infants in arms. NO open toed sandals of any kind.
- h. Outer coats and coat sweaters shall not be permitted in the visiting area. Sport coats, blazers, jogging jackets (if they are a part of a matching outfit) shall be permitted. Light sweaters are permitted.
- i. Spandex pants/shorts, leggings, stirrup pants are not permitted in the Visiting Room.
- j. The Superintendent or designee may cancel a visit if the visitor's attire is considered inappropriate.

17. Offenders and visitors are not permitted to wander from one visiting area or table to another.

18. Vending machines are provided in the Visiting Room for your convenience. No beverages, cups, or other vending machine items may be taken into or out of the Visiting Room. Offenders are not permitted to go to or use the vending machines.

19. Kissing and embracing between visitors is permitted at the beginning and end of the visit. There shall be no kissing or embracing during the actual visit. Offenders may hold hands with their visitor during the visit; however, offenders shall not touch any other part of the visitor's body.

20. Visitors are responsible for the behavior and control of minor children. If minor children are a major disruption, visitors may be requested to leave the facility and the visit shall be terminated.

21. If a visitor or offender is found to be trafficking, the evidence shall be turned over to the Indiana State Police with a recommendation that the matter be prosecuted to the fullest extent. In addition, any visitor caught trafficking shall be permanently banned from visiting any offender in the Department of Correction and any Department facility.

22. THE PENDLETON JUVENILE CORRECTIONAL FACILITY IS A TOBACCO FREE FACILITY. TOBACCO PRODUCTS AND PARAPHENALIA ARE NOT AUTHORIZED.

23. Any offender found to be engaging in trafficking or using or in possession of a controlled substance shall have his visiting privileges restricted to "non-contact" visits only. The first offense, the "non-contact" visits shall be for a period of six (6) months; second offense – twelve (12) months; third and subsequent offenses following two (2) previously imposed non-contact – Permanent non-contact visiting.

24. Public Transportation is available at some facilities; however, there may be a cost for the use of this transportation and the Department of Correction does not endorse or claim any liability for the use of the transportation provider.