Request for Chaplain Interaction with an Offender or Ex-Offender

Chaplains may interact with offenders and ex-offenders in certain circumstances to facilitate re-entry. Examples include inviting ex-offenders to worship services or study groups, providing pastoral counseling, or assisting ex-offenders with securing transportation, housing, job training or placement, etc. These activities must be approved in advance and shall be PROFESSIONAL AND TEMPORARY.

Please fill out this application and submit it to the Facility Unit Head at the facility where you serve as Chaplain. (If the ex-offender was released from a different facility, please note this and give the reason/justification for assisting the offender.) Additionally, if the offender is on any form of post-release supervision (probation, parole, etc.), this form should also be submitted to the Chief P&P Officer of the offender’s P&P District. You must receive approval from the Facility Unit Head (and also from the Chief P&P Officer – when applicable) before assisting the offender. Approval applies only for contact listed below.

Note: It is the responsibility of the Chaplain to obtain signatures from the Facility Unit Head and, when applicable, the Chief P&P Officer. The Facility Unit Head shall ensure that a copy of this form is maintained at the facility (if the offender is still incarcerated). The Chief P&P Officer shall ensure that a copy of this form is placed in the offender’s P&P case supervision file if the offender is in community supervision status. If neither of the above is true, the Chaplain will keep the form in their personal files. The Chaplain should also in all cases keep a copy of this form in their personal files for documentation.

I am requesting permission to assist an offender or ex-offender to facilitate the offender's re-entry. I am aware of Code of Virginia and of Department Of Corrections limitations on interaction with offenders and ex-offenders and have read DOC Operating Procedure 135.2, Rules of Conduct Governing Employees Relationships with Offenders.

Offender Name: ____________________________ Number: ____________________________

Current Status:

☒ Incarcerated at: ____________________________ Release Date: ____________________________

☐ Community Supervision in District: ____________________________ Supervising P&P Officer: ____________________________

☐ Released to Community, No Supervision

Chaplain’s Name: ____________________________ Date of Request: ____________________________

Nature of Interaction(s)/Assistance: ____________________________________________

_________________________________________________________________________

Estimated Duration of Interaction(s)/Assistance: ____________________________

Chaplain’s Signature: ____________________________________________

Facility Unit Head Action ☐ Approved ☐ Disapproved Comments: ____________________________

Signature: ____________________________ Date: ____________________________

Chief P&P Officer Action ☐ Approved ☐ Disapproved Comments: ____________________________

Signature: ____________________________ Date: ____________________________

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