

**JESUS IS THE WAY PRISON MINISTRY  
PO BOX 98  
RANTOUL IL 61866-0098  
(217) 892-4044**

**CLERGY INFORMATION SHEET FOR CHAMPAIGN COUNTY JAIL**

DATE \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_

COMPLETE NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CHURCH \_\_\_\_\_ DENONATION \_\_\_\_\_

CHURCH ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CHURCH PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

<u>DEGREES</u>	<u>NAME OF COLLEGE</u>	<u>YEAR OBTAINED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REFERAL SOURCE CIRCLE ONE:**      INMATE      COUNSELOR      ATTORNEY      CENTER STAFF  
   PARENT      INMATE'S WIFE      OTHER

ALL VOLUNTEERS, WHETHER WORKING AT THE CORRECTIONAL CENTER IN THEIR PROFESSIONAL CAPACITY OR AS A COMMUNITY VOLUNTEER, ARE REQUIRED TO COMPLETE THE FOLLOWING INFORMATION FOR A PRELIMINARY RECORDS CHECK A POSITIVE PRELIMINARY RECORDS CHECK WILL REQUIRE THE PERSON TO BE FINGER PRINTED FOR AN FBI RECORDS CHECK.

**ALL QUESTIONS MUST BE ANSWERED**

**SEX:** MALE    FEMALE    **RACE:** WHITE    BLACK    ORIENTAL    AMERICAN INDIAN    HISPANIC

**BIRTHDATE** \_\_\_\_\_ **STATE OF BIRTH** \_\_\_\_\_ **HEIGHT** \_\_\_\_\_ **WEIGHT** \_\_\_\_\_

**COLOR OF EYES** \_\_\_\_\_ **COLOR OF HAIR** \_\_\_\_\_ **COMPLEXION:** DARK    MEDIUM    LIGHT

**SCARS, MARKS, TATOOS, BIRTHMARKS: (WHAT AND LOCATION)** \_\_\_\_\_

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**DO YOU HAVE A FIREARMS PERMIT? YES OR NO - FOID** \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES OR NO    HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR? YES OR NO    IF YOU HAVE ANSWERED "YES" TO EITHER OF THE LAST TWO QUESTIONS, PLEASE COMPLETE THE FOLLOWING INFORMATION: WHAT WAS THE CHARGE AND DISPOSITION OF THE CASE?** \_\_\_\_\_

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I HEREBY VOLUNTARILY AUTHORIZE AND CONSENT TO THE RELEASE OF INFORMATION AND RECORDS BEARING MY PERSONAL HISTORY, EMPLOYMENTS, ARRESTS, AND CONVICTIONS, IF ANY, TO AUTHORIZED REPRESENTATIVES OF THE CHAMPAIGN COUNTY CORRECTIONAL CENTER. THIS INFORMATION WILL BE USED FOR THE SOLE PURPOSE OF DETERMING MY QUALIFICATIONS FOR VOLUNTEER SERVICES WITH THE CHAMPAIGN COUNTY SHERIFF'S OFFICE.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_