

**Lorain/Medina Community Based Correctional Facility**

9892 Murray Ridge Rd.

Elyria, Ohio 44035

440-281-9708, Fax 440-281-9713

Mail/Fax Attention: Nicole Hepler, Volunteer Coordinator

Volunteer Application

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email Address \_\_\_\_\_

Check below the appropriate volunteer services that you are applying for:

- Al-Anon
- Alcoholics Anonymous
- Catholic Ministries to the Incarcerated
- Narcotics Anonymous
- Religious Services through Advent Ministries
- Other \_\_\_\_\_

If applying for Alcoholics Anonymous, check the appropriate box (es) for scheduling purposes:

- Sundays 10:00- 11:00 a.m.
- Mondays 7:00- 8:00 p.m.
- Wednesdays 8:00- 9:00 p.m.
- Thursdays 6:30-7:30 p.m.
- Saturdays 4:00- 5:00 p.m.

The schedule for Catholic Ministries to the Incarcerated is Tuesday evenings only from 6:30- 8:00 p.m.

Narcotics Anonymous is scheduled for Friday evenings from 6:30-7:30 p.m.

If applying for religious services, check the appropriate box (es) for scheduling purposes:

- Sundays 6:30- 8:00 p.m.
- Thursdays 7:30- 9:00 p.m.

In the event of an emergency, contact: Name \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Telephone \_\_\_\_\_

What is your area of interest, skill and commitment to the C.B.C.F.? \_\_\_\_\_

Which organization (12-step/religious group) are you affiliated with?

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

What is your position in this organization? \_\_\_\_\_

How long have you been an active member? \_\_\_\_\_

If applicable, length of sobriety? (2 year minimum is required). \_\_\_\_\_

Are you presently on any type of community control sanctions (court supervised release, state probation, ISP, or parole)?  Yes  No If Yes, which? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If Yes, date? \_\_\_\_\_

Do you have any pending charges?  Yes  No If Yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director Signature

\_\_\_\_\_  
Date