MAINE DEPARTMENT OF CORRECTIONS VISITOR APPLICATION

DIRECTIONS: Carefully read all parts of this application and complete all sections that apply to you and any minor you wish to bring to visit. **Incomplete applications will not be processed and false information may result in denial of visiting privileges**.

Prisoner's Name:		MDOC #
SECTION 1: VISITOR INFO	RMATION (<u>ONLY ONE VI</u>	SITOR'S NAME ON EACH APPLICATION)
Visitor's Printed Name:		Male Female
Date of Birth:	Last four (4) digits of Social Security Number:	
Previous other legal name(s):		
Visitor's Street/Road Address (Networks)	ot a P.O. Box):	
City/Town:	State:	Zip code:
Mailing Address (if different): _		
Phone Number:	Email Address:	
Driver's License or State ID #:		State:
Relationship to the Prisoner:		
Do you have a Juvenile or Adult	Criminal Record?	Yes 🗌 No
If yes, list your adjudications and	/or convictions:	
	(For extra space, use back	k of form)
LIST THE NAMES OF MINORS		
Name:	DOB:	Relationship to Prisoner:
Name:	DOB:	Relationship to Prisoner:
Name:	DOB:	Relationship to Prisoner:
I attest that I am a parent or legal guardian to bring the above-named r		r(s) or that I have authorization by a parent or legal
Printed Name:	Signature:	Date:

<u>Note</u>: If listing a minor, attach certified copy of minor's birth certificate, court adoption order, or court guardianship order. If you are not a parent or legal guardian of the minor, ALSO attach notarized permission from a parent or legal guardian (other than a prisoner) to bring in the minor as a visitor.

SECTION 2: RESTRICTIONS

- A minor (person under the age of 18) may not visit unless accompanied at the visit by a parent or legal guardian, or by another adult with the written permission of a parent or legal guardian and prior approval of Chief Administrative Officer, or designee. The only exception to this rule is for a minor who is married or emancipated by court order (attach certified copy of marriage certificate or court order of emancipation).
- 2) A prisoner convicted of or otherwise known to have committed domestic violence, a sex offense against a minor, or child abuse is prohibited from visiting with the victim(s) without prior approval of the Department's Director of Victim Services, or designee. A prisoner convicted of or otherwise known to have committed child neglect is prohibited from visiting with the victim(s) without prior approval of the Chief Administrative

Officer, or designee. Approval will not be granted if it is contrary to a court order (e.g., custody order or protection order) or condition of bail or conditional release, administrative release, deferred disposition, probation, supervised release for sex offenders, parole, or community reintegration status.

- 3) If there is a current notification issued under Title 17-A, section 506-A, for a prisoner not to engage in harassing conduct against another person, the prisoner will not be allowed to receive a visit from that person.
- <u>Note</u>: For additional information, see Department Policies (AF) 21.4, Prisoner Visitation, and 6.3, Contact with Victims, which are available from each facility and at the Maine Dept. of Corrections website at http://www.maine.gov/corrections/PublicInterest/policies.shtml

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SECTION 3: STATUTES

M.R.S.A. TITLE 17-A, SECTION 757 A person is guilty of **TRAFFICKING IN PRISON**

CONTRABAND if that person intentionally conveys or attempts to convey contraband to any person in official custody. Contraband, for the purpose of this section, is defined as a dangerous weapon, any tool or other item that may be used to facilitate escape or any other thing that a person confined in official custody is prohibited by statute from making, possessing, or trafficking in or a scheduled drug. Examples of contraband are: guns, knives, cutting blades, files, drugs, including marijuana, and cellphones. Punishment may include imprisonment for up to 5 years.

M.R.S.A. TITLE 17-A, SECTION 757-A

A person is guilty of **TRAFFICKING OF TOBACCO** in an adult correctional facility if that person intentionally conveys or attempts to convey tobacco or tobacco products to a person confined in an adult correctional facility that has banned the use of tobacco or tobacco products by prisoners. Punishment may include imprisonment for up to 6 months.

THE MAINE STATE PRISON, THE MAINE CORRECTIONAL CENTER (EXCEPT FOR SOUTHERN MAINE RE-ENTRY CENTER) AND MOUNTAIN VIEW HAVE BANNED THE USE OF TOBACCO OR TOBACCO PRODUCTS BY PRISONERS.

M.R.S.A. TITLE 17-A, SECTION 757-B

A person is guilty of **TRAFFICKING OF AN ALCOHOLIC BEVERAGE** in an adult correctional facility if that person intentionally conveys or attempts to convey an alcoholic beverage to a person confined in an adult correctional facility. Punishment may include imprisonment for up to 6 months.

SECTION 4: CLEARANCE NOTIFICATION

Applicant's Drinted Name

Applications are processed as quickly as possible. All visitors to facilities must wait until a criminal records check has been

completed. This process is done by the State Bureau of Identification and may take several weeks. You will be notified in writing if you are not approved. The prisoner will notify you if you have been approved. **Please do not call the facility asking whether you have been approved.**

Each adult visitor is required to present government-issued picture identification, such as a driver's license. A minor visitor may be required to present a government-issued identification card or a certified birth certificate.

SECTION 5: PUBLIC TRANSPORTATION

There is no public transportation to or from any Maine Department of Corrections facility. Upon request, facility staff will make a phone available to visitors to call for transportation and will assist in facilitating transportation between the facility and nearby public transit terminals, if any.

SECTION 6: VISITATION MONITORING

It is possible that communications by or with prisoners made during visits will be listened to and/or recorded by an Investigative Officer or other employee of the Maine Department of Corrections authorized to exercise law enforcement powers. This does NOT apply to attorney/client privilege information.

SECTION 7: READ CAREFULLY

I understand and acknowledge the information given above. I acknowledge that I am subject to search prior to and as a condition for visiting at Department of Corrections facilities. I, and any minor I bring with me, will abide by the visitation rules set out in Department Policy (AF) 21.4, Prisoner Visitation, available at each facility and at the Maine Dept. of Corrections website at

<u>http://www.maine.gov/corrections/PublicInterest/policies.shtml</u> and posted at the facility (including the visitor dress code). I understand that if I, or any minor I bring with me, violate the visitation rules, the visit may be terminated and my visiting privileges may be suspended.

The above is an overview. Please refer to Department Policies (AF) 21.4, Prisoner Visitation, and 6.3 Contact with Victims, available from each facility and at the Maine Department of Corrections website http://www.maine.gov/corrections/PublicInterest/policies.shtml for a full explanation.

Signature of Applicant:	Date:
Return completed application to:	
 Maine State Prison 807 Cushing Road Warren, ME 04864 	 Bolduc Correctional Facility 516 Cushing Road Warren, ME 04864
 Mountain View Correctional Facility 1182 Dover Road Charleston, ME 04422 	 Southern Maine Women's Re-Entry Center c/o Maine Correctional Center 17 Mallison Falls Road Windham, ME 04062
 Maine Correctional Center 17 Mallison Falls Road Windham, ME 04062 	, ,