



STATE OF OREGON
DEPARTMENT OF CORRECTIONS
Volunteer Program
(503) 945-2848

Information Update

If you are no longer actively volunteering, please check the Inactive box above and fill in your full name below. Do not fill out the rest of the form and then mail it to the address at the bottom of the other side of the form along with you ID Card (if you have one). Active volunteers should complete the entire form.

Last Name: _____ First: _____ Middle: _____

Inactive

Address: _____ _____ _____	Home Phone: (_____) _____ - _____ Msg Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____ Driver's License #: _____ State: _____ Date of Birth: ____/____/____
City: _____ State: _____	
Zip Code: _____	
Email: _____	

Education (Please circle the highest completed):

Elementary Middle-School High-School Associates Bachelors Masters Doctorate

Height: _____ Ft _____ In Weight: _____ Eye Color: _____ Hair Color: _____

AFFILIATION	
Name: _____	
Address: _____ _____	Contact Person: _____
City: _____ State: _____	Phone #: (_____) _____ - _____
Zip Code: _____	

Emergency Notification

In case of emergency, please notify the following person:

Name: _____ Daytime Phone: (_____) _____ - _____

Address: _____ Evening Phone: (_____) _____ - _____

_____ Msg/Cell Phone: (_____) _____ - _____

City: _____ State: _____ Zip: _____ Relationship: _____

Emergency Information

Physician: _____ Phone: (_____) _____ - _____

Medical Conditions: _____

Allergies: _____

Background Investigation Section

Are you currently on parole or probation or have you been arrested in the past year? Yes No If yes, please give details:

Are you currently on an Oregon Department of Corrections' inmate's visiting list or are you related to, or a close friend of a Department of Corrections' inmate? Yes No If yes, please list the following:

Inmate's Name: _____ SID: _____ Relationship: _____

Please complete and return the update form to:

Rev. Dr. Les Sinclair, CVA
Volunteer Program
Oregon Department of Corrections
2575 Center Street NE
Salem, OR 97310-0470

VolProg@doc.state.or.us