### BID ATTACHMENT 3, APPLICATION FOR ENTRY AND PREA FORM



#### MANATEE COUNTY SHERIFF'S OFFICE CORRECTIONS BUREAU APPLICATION FOR FACILITY ENTRY



Section A: To be completed by Visitor / Contracted Employee / Volunteer:

By completing and signing this form, I authorize a Manatee County Sheriff's Office employee or authorized representative bearing this release, or copy thereof, to obtain my criminal history by conducting an FCIC/NCIC check prior to my being granted entry. Consent is granted for the agency to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, both individually and collectively from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization, or any attempt to comply with it. A photocopy of this form will be as effective as the original.

Printed Name:			Date of Birth:	<del> </del>
Race (White or Black):	Sex:	Social Security Nu	ımber: (Mandatory	) <u></u>
Home Address:				
Office Phone:	Home Phone: _		Cell Phone	·
E-mail Address:				
Florida Private Investigator License (if applicab	le):			
Company / Organization Represented:				
Reason for Facility Entry:				
speak to each other using a telephone. If documents in the for signature and then will return it to the lift you require a face-to-face contact visit with the Operations Commander. Please state the	e visitor. h an inmate (con	ducted on the 1st flo	or of the facility)	,
WAIVER: By signing below, I hereby acknow individually and collectively, from any and a direct or indirect consequence of any injury agree to proceed at my own risk.  Signature:	Il liability for dam or harm inflicted	nages of whatever kir during a contact vis	nd, which may at	anytime, result to me as a e in the jail facility and I
Printed Name:				
Section B: To be completed by Authorized Person				
Authorized Personnel completing check:				
Section C: To be completed by Operations Mana				
Secure area access Approved:	Do	enied:		
Non-Secure area access Approved:	De	enied:		
Recovery Pod Only: True Core Only:	Outside V	endor: One 7	Time Only:	Staff Dining Only:
Signature:		Date:		



### MANATEE COUNTY SHERIFF'S OFFICE

#### Corrections Bureau



Prison Rape Elimination Act (PREA) Hiring and Promotion Decisions 115.17 (a)(1-3)

#### Sexual Assault/Abuse Awareness/History Form

The standards for the Prison Rape Elimination Act (PREA) of 2003 (Public Law 108-79 September 4, 2003) were officially signed into federal law August of 2012 to protect the Eighth Amendment rights of all inmates. PREA was enacted by the United States Congress to address the problem of sexual assault of inmates in all penal facilities. PREA requires that standards be developed and implemented for the detection, prevention, reduction and punishment of all sexual abuse/harassment.

It is the responsibility of the Manatee County Sheriff's Office personnel to be familiar with all the information readily available to prevent, detect, report and respond to incidents of sexual abuse and sexual harassment.

In accordance with the Prison Rape Elimination Act of 2003, the Manatee County Sheriff's Office has a zero tolerance policy towards inmate sexual assault, abuse and harassment. The Manatee County Sheriff's Office will investigate all reported incidents of sexual assaulted, abused or harassed and will discipline and/or prosecute those who sexually assault, abuse or harass inmates.

Any employee, volunteer, contractor, vendor or official visitor can and will accept any information from an inmate regarding sexual abuse, sexual assault or sexual harassment and will immediately forward the report to a supervisor. An inmate may feel more comfortable reporting sexual assault, sexual abuse or sexual harassment to someone other than a corrections deputy, and all individuals are legally bound to immediately report the information for further actions including medical and mental treatment, segregation from the suspect, collection of evidence, criminal investigation and other necessary procedures. Time is of the essence in reporting sexual abuse and sexual assault.

The definition of sexual assault/abuse is engaging in, or attempting to engage in, a sexual act with any inmate or the intentional touching of an inmate's genitalia, anus, groin, breast, inner thigh or buttocks with the intent to abuse, humiliate, harass, degrade, arouse or gratify the sexual desire of any person. Sexual acts or contacts between an inmate and a staff member, even when no objections are raised, are always illegal, and by law, considered non-consensual.

#### Sexual abuse includes -

- (1) Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident; and
- (2) Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer.

Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus:
- (3) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
- (4) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
- Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident:
- (1) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- (2) Contact between the mouth and the penis, vulva, or anus;
- (3) contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire:
- (4) Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (5) Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- (6) Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;
- (7) Any display by a staff member, contractor or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and
- (8) Voyeurism by a staff member, contractor, or volunteer.

Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee, or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

INSTITUTION - (1) The term "institution" means any facility or institution-

- (A) which is owned, operated, or managed by, or provides services on behalf of any State or political subdivision of a State; and
- (B) which is -
- (i) for persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped;
- (ii) a jail, prison, or other correctional facility;
- (iii) a pretrial detention facility;
- (iv) for juveniles -
- (I) held awaiting trial;
- (II) residing in such facility or institution for purposes of receiving care or treatment; or
- (III) residing for any State purpose in such facility or institution (other than a residential facility providing only elementary or secondary education that is not an institution in which reside juveniles who are adjudicated delinquent, in need of supervision, neglected, placed in State custody, mentally ill or disabled, mentally retarded, or chronically ill or handicapped); or
- (IV) providing skilled nursing, intermediate or long-term care, or custodial or residential care.

**MANDATORY**: All Manatee County Sheriff's Office employees, contractors, volunteers and vendors must answer (3) questions required by the PREA 115.17 titled: "Hiring and Promotion Decisions". (see the last page)

# MANATEE COUNTY SHERIFF'S OFFICE Corrections Bureau

# Prison Rape Elimination Act (PREA) <u>Sexual Assault/Abuse Awareness/History Form</u>

**PREA 117.17 (A) (1-3)** The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor or volunteer who may have contact with inmates who answer **YES** to any of the following questions:

<ol> <li>Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution?</li> </ol>						
	YES	NO 🗌				
2) Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent, was unable to consent or refused?						
	YES	NO 🗌				
3) Have you been civilly or administratively adjudicated to have engaged in the activity described in question (2)?						
	YES	NO 🗌				
By signing below you swear and affirm you have truthfully answered the above questions and/or understand the Manatee County Sheriff's Office Zero - Tolerance Sexual Assault, Sexual Abuse and Sexual Harassment policy. Additionally, you confirm you have read and understand the PREA definitions.  Check here if you are not an employee, vendor, volunteer or contractor.						
Printed Name		Signature	Date			
Occupation/Title	Con	npany/Agency	Company/Agency Telephone			

PREA Coordinator Page 3

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