



Monroe County Jail and Correctional Facility Application for Clearance to Enter Facilities



COPY OF DRIVER'S LICENSE OR PHOTO ID WITH DOB REQUIRED

You must be at least 18 years old to enter the facilities

Todd K. Baxter - Sheriff

Korey K. Brown - UnderSheriff

Ronald W. Harling- Superintendent

Name: _____ DOB: _____

Address: _____

Email: _____ Phone: _____

Gender: M F Race: White Black Hispanic Asian Native American Other

Organization: _____ Organization Phone: _____

Supervisor's Name: _____ Supervisor's Phone: _____

Clearance Type you are requesting: Clergy Group Church Service Educational Program

Professional Agency Rehab Program AA NA Other (describe): _____

Have you ever been arrested? Y N If yes, please explain: _____

Do you have a Criminal Record? Y N If yes, please explain: _____

Are you on Probation or Parole? Y N If yes, please explain: _____

Have you ever been on Probation or Parole? Y N If yes, please explain: _____

Do you need any special accommodations? Y N If yes, please explain: _____

Applicant's Signature: _____

Date: _____

Sponsor's Signature: _____

Date: _____

Office Use Only

Orientation Completed: Y N Date: _____

eJUSTICE: Y N Date: _____

MoRIS Completed: Y N By: _____ Date: _____

Clearance: DENIED Reason: _____

APPROVED Date: _____

Type of Clearance: All Access Program Only Visits Only Contractor Vendor ID

Notified of Clearance: email phone mail in person Date: _____

Completed By: _____ PIN: _____



Please return this form and a copy of the required ID to facility staff sponsoring your program or to the Director of Rehabilitation, Monroe County Jail, 130 S. Plymouth Ave, Rochester, NY 14614

