Platte County Detention Facility

Volunteer/Contractor Application

PREA Background Check

Name: **Click or tap here to enter text.** Date: **Click or tap to enter a date.**

Maiden Name or Other Names Known by: **Click or tap here to enter text.**

Date of Birth: **Click or tap here to enter text.**

Telephone Number: **Click or tap here to enter text.**

Email Address: **Click or tap here to enter text.**

Reason for Clearance: **Click or tap here to enter text.**

Volunteer Group/Contact Group/Company: **Click or tap here to enter text.**

|  |
| --- |
| Department Use:  Application Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  PREA Training Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approval Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |