



**PHILADELPHIA DEPARTMENT OF PRISONS  
APPLICATION FOR CLEARANCE – NON-CITY EMPLOYEE**

**PERSONAL HISTORY (Print Clearly)**

<b>Name</b>	<b>Mailing Address</b>			<b># of Years at Location</b>
<b>Social Security No.</b>	<b>Home Phone#</b>	<b>Work Phone #</b>	<b>Email Address</b>	
<b>Marital Status</b>	<b>Height</b>	<b>Eye Color</b>	<b>Hair Color</b>	<b>D.O.B.</b>
<b>Previously Used Aliases (A.K.A.'s):</b>		<b>Currently Incarcerated Relative (PDP Only*)</b>		<b>If yes, please list relative name and PP#</b>
		Yes	No	

<b>Arrest Record (Including Juvenile Arrests)</b>			<b>Miscellaneous</b>		
	<b>Yes</b>	<b>No</b>		<b>Yes</b>	<b>No</b>
1. Have you ever been arrested?			5. Do you object to being fingerprinted?		
2. Have you ever been convicted of a crime?			6. Do you object to being photographed?		
3. Has any member of your family been convicted of a crime?			7. Do you use intoxicating liquor? If yes, state the intended purpose		
4. Are you currently under any kind of Court Order, Support or other payment agreement?			8. Do you use or have ever used drugs? If yes, state extent below		

9. Explanation of "Yes" for questions 1-4, 7 and 8. For 1-4 arrests, indicate charges and disposition.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

**EDUCATION**

<b>School/College</b>	<b>Location</b>	<b>Yrs Attended From – To</b>	<b>Graduation Year(s)</b>	<b>Major/Degree</b>

**References**

*(List 3 references other than relatives or former employers)*

<b>Name &amp; Position</b>	<b>Organization</b>	<b>Address</b>	<b>Telephone Number</b>

<b>Emergency Contact</b>	<b>Relationship</b>
<b>Address</b>	<b>Telephone Number</b>



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**Reason for Application** *(Indicate if Religious, Educational, Treatment Student, etc.):*

**Name of Affiliation or Sponsoring Organization:**

**Affiliation / Sponsoring Organization's Coordinator Information**

**First Name**

**Last Name**

**Phone No.**

**Email Address**

**Organization Address**

**If granted the requested clearance, I agree to abide by the policies, procedures, rules and regulations of the Philadelphia Department of Prisons.**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Email completed form to [PDP.Volunteer@Prisons.Phila.Gov](mailto:PDP.Volunteer@Prisons.Phila.Gov)