Prison Rape Elimination Act (PREA) Training Acknowledgement Form for Volunteers and Contractors

By signing below, I am acknowledging that I have received a copy of the brochure entitled “A Guide to Maintaining Appropriate Boundaries with Offenders for Contractors and Volunteers of the Virginia Department of Corrections.” I also certify that I have viewed the Prison Rape Elimination Act (PREA) PowerPoint presentation and have reviewed the Virginia Department of Corrections Operating Procedures135.2 Rules of Conduct Governing Employees Relationships with Offenders and 038.3 Prison Rape Elimination Act. By my signature, I am acknowledging that I understand that the Virginia Department of Corrections has a zero tolerance policy for sexual abuse or sexual harassment between offenders and between staff/contractors/volunteers and offenders, and I agree to abide by that policy. I likewise have been made aware of my requirement to report to my supervisor or to the district/facility administration any known instances or suspicions of sexual abuse or harassment of offenders, whether in custody or on community supervision.

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Signature of Volunteer/Contractor Date

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Signature of PREA Trainer Date