

# AA Monroe County Jail Clearance Application Process

## How do I apply to get cleared?

You must fill out the application and include a picture of your photo ID.

The application can be found on the AA website ([www.rochester-ny-aa.org](http://www.rochester-ny-aa.org)) or at Central Office.



## How do I fill out the application?

- Organization: *Alcoholics Anonymous*
- Phone number: *585-232-6720*
- Supervisor's name and Supervisor's phone: *n/a*
- Clearance Type you are requesting? *Inside Security*
- Purpose of Clearance: *D/A Rehab Program* (not accurate, but that is how they classify our meetings)
- Do you have a Criminal Record? Are you on Probation or Parole? Have you ever been arrested? *If "yes," list any charges under "please explain." If you are unclear on your criminal history, you may obtain a copy of your criminal history at the Records office at the Hall of Justice.*
- Applicant's signature: *Application must signed and dated.*
- *Complete & Sign Page 2 to disclose any connections with anyone who is currently or has ever been incarcerated in the Monroe County Jail.*

## What do I do next?

- First, submit your application to Central Office. You will need to include a Copy of Driver's License or Photo ID w/ DOB. You can drop off a copy or email to [office1@rochester-ny-aa.org](mailto:office1@rochester-ny-aa.org).
- **Then wait to hear from the Corrections Committee Liaison if you have been cleared to attend the Volunteer Orientation.**
- The liaison will let you know when the next orientation is scheduled to be held. Orientations are held at the Monroe County Sheriff's training center at 750 E. Henrietta Rd. next to MCC (former MCF). Bring your Driver's License or Photo ID w/ DOB to orientation.
- You will also need to schedule a time to get fingerprinted at the Hall of Justice after you receive a fingerprinting letter from the Corrections Committee Liaison.
- **You may mail your application or physically drop off at: AA Central Office, 1000 Elmwood Avenue – Greenhouse, Rochester, NY 14620**

## What if I still have questions?!

- We've got you covered! Contact Sue at Central Office at 585-232-6720 or stop by the office at 1000 Elmwood Avenue, Rochester, NY 14620 or email [Corrections\\_Committee@rochester-ny-aa.org](mailto:Corrections_Committee@rochester-ny-aa.org)

*Updated April 2024, AA Corrections Committee, Rochester, NY*



**Office of the Sheriff**  
Monroe County, New York  
**Sheriff Todd K. Baxter**  
**Undersheriff Corey K. Brown**

Thank you for your interest in obtaining jail clearance to work with our incarcerated population!

Jail clearance process:

1. Submit clearance packet and a copy of your license or government issued photo ID to the AA Central Office or email to [office1@rochester-ny-aa.org](mailto:office1@rochester-ny-aa.org). Please make sure the forms are complete and accurate. Be honest and as detailed as you can. Prior arrests and knowing anyone incarcerated does **NOT** automatically preclude you from obtaining clearance; however, dishonesty and omissions will. You also need to be free of contact with the criminal justice system (jail, prison, secure treatment facilities, probation, and parole) for a minimum of four years. You must be at least 18 years old to enter the facilities. You must include **ALL** of the following or your paperwork will not be processed:
  - Clearance Application
  - Family/Friend Custody Form
  - Copy of driver's license or other government issued photo ID (i.e. passport)
2. Once the above documents are received, the Sheriff's Office will conduct a record check, warrant search, and facility database search. If you are entering the jail (not visits), you will need to be fingerprinted as part of the record check.
3. You (or your program coordinator) will be notified whether or not your paperwork has been approved.
4. If approved, you will need to sign up for and successfully attend an orientation session before being allowed access to the facility.
5. Individuals may be denied entrance with criminal histories that involve serious crimes such as murder, attempted murder, assault, robbery, sexual offenses, stalking, and kidnapping. In addition, individuals charged with possession or sale of drugs, promoting prison contraband, hate crimes, weapon offenses, or terrorism may not be granted access although their criminal history is greater than four years.



**Office of the Sheriff**  
Monroe County, New York  
**Sheriff Todd K. Baxter**  
**Undersheriff Corey K. Brown**

**Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Alisa/Maiden Name:** \_\_\_\_\_ **Personal Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Gender:** M F

**Race:** White Black Hispanic Asian Native American Other \_\_\_\_\_

**Organization:** \_\_\_\_\_ **Organization Phone:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Supervisor's Phone:** \_\_\_\_\_

**Clearance Type Requested:** Professional Visits Inside Security

**Purpose of Clearance:** D/A Rehab Program Educational Program Reentry Program

Religious Volunteer Contractor Medical/Mental Health Food Service/Commissary

**Have you ever been arrested?** Yes No **Do you have a Criminal Record?** Yes No

If yes, please explain (include city and state of arrest): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Are you on Probation or Parole?** Yes No **Have you ever been on Probation or Parole?** Yes No

If yes, please explain: \_\_\_\_\_

**Do you need any special accommodations?** Yes No If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office Use Only

**Orientation Completed:** Yes N/A **Date:** \_\_\_\_\_

**eJustice Completed:** Yes N/A **Date:** \_\_\_\_\_

**Clearance Type Approved:** Visits Only Inside Security **Date:** \_\_\_\_\_

All Access Contractor (with escort) Program/Group/Service Only Vendor ID

**Completed By:** \_\_\_\_\_ **PIN:** \_\_\_\_\_

Applicants for employment or volunteer positions, and professional agencies working with incarcerated individuals in the Monroe County Jail facilities must complete this form in order to assure compliance with certain standards and policies. A “yes” response will not disqualify applicants from obtaining security clearance.

1. Your name: \_\_\_\_\_

2. Do you know anyone who is **currently or ever been** incarcerated in the Monroe County Jail or the Andrew P. Meloni STAR Academy (formerly Monroe Correctional Facility)?

Yes

No

Yes, but in a professional capacity only

3. If yes, please list all inmates known to you except those in a professional capacity:

NAME	RELATIONSHIP

I declare, subject to the penalties of perjury, that the statements made in this form have been examined by me and to the best of my knowledge and belief are true and correct. Any false statements made, if subsequently discovered, may result in revocation of my security clearance.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date