|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Prisoner Last Name \*  Last Name Here | Prisoner First Name \*  First Name Here | MI  MI Here | Date of Birth  Date of Birth Here | Offender #  Offender Number Here |
| **READ CAREFULLY**: Please complete this form to request visitation at GCCC. Visitation is a privilege and may be suspended or revoked at any time. All mandatory fields (\*) must be filled out accurately, any omission or falsification may result in denial or cancellation of privileges. Completed forms must be mailed/emailed to the address below. **Please attach a copy or photo of a valid government-issued ID**. For minors, a Parent or Legal Guardian must complete the Minor Visitor Application form; prisoners cannot complete this form on behalf of a child.  **Goose Creek Correctional Center: Attention Visiting Application 22301 W Alsop Road Wasilla, AK 99623**  **doc.gccc.visitation@alaska.gov** | | | | |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name (Last) \*  Enter Last Name Here \* | | | | | Name (First) \*  Enter First Name Here \* | | MI  MI | Suffix i.e. Jr/III  Suffix Here | | Gender\*  M  F | Marital Status  Choose an item. |
|  |
|  |
| Date of Birth \*  Click or tap here to enter text. | | | | Social Security Number \*  Click or tap here to enter text. | | | ADL-ID \*  Number \* | | Email Address \*  Click or tap here to enter text. | | |
| Telephone Number \*  Enter Phone Number Here \* | | | | | Physical Address \*  Click or tap here to enter text. | | | | Mailing Address \*  Click or tap here to enter text. | | |
| Other States Lived in \*  Enter States Here \* | | | Relationship to Prisoner \*  Enter Relationship Here \* | | | \* Disclosure of all information above is mandatory if you wish to be granted visitation privileges. Information received may be shared with other law enforcement agencies when appropriate. | | | | | |
| **Please supply the following information and/or check the appropriate box \*** | | | | | | | | | | | |
| **Y** | **N** |  | | | | | | | | | |
|  |  | Have you visited with other Alaska DOC prisoners in the last year? If yes, indicate the prisoner(s) and the location(s):  Click or tap here to enter text. | | | | | | | | | |
|  |  | Have you ever been involved in illegal or criminal activity with the above-named prisoner? If yes, when and where?  Click or tap here to enter text. | | | | | | | | | |
|  |  | Have you any criminal matters pending, wants, warrants or have been in custody in the last 90 days anywhere?  Click or tap here to enter text. | | | | | | | | | |
|  |  | Have you been convicted of a felony in any jurisdiction? If yes, name the state, date and place.  Click or tap here to enter text. | | | | | | | | | |
|  |  | Are you currently under active parole, probation supervision or any other type of supervision?  Click or tap here to enter text. | | | | | | | | | |
|  |  | Are you a victim of the current or past crime committed by the prisoner with whom you wish to visit? If yes, please describe.  Click or tap here to enter text. | | | | | | | | | |
|  |  | Are any of your minor visitor(s) a victim of the prisoner with whom you wish to visit? If yes, please describe.  Click or tap here to enter text. | | | | | | | | | |
|  |  | Have you ever been an employee/volunteer/contractor for the Department of Corrections? If yes, when and where?  Click or tap here to enter text. | | | | | | | | | |

**Acknowledgement and Authorization**

I have read and understand the above statements. I certify that the information I have provided is true and correct. I understand that providing false, misleading, or incomplete information may result in the rejection of my application, removal from the eligible visitor list, or termination of my visiting privileges if approved. I also understand that a background check will be conducted, including review of my arrests and convictions.

I hereby authorize the release to the Superintendent of Goose Creek Correctional Center of any record of criminal offenses for which I have been arrested or convicted, and any related information pertaining to those convictions.

Click for Date.

Applicant Signature Date