



Pathways to Freedom Ministries

Inmate Application

This application is to be filled out by the inmate or on behalf of the inmate. Please answer all questions as thoroughly as possible. This application will be used to assess the inmates' suitability for the mentoring program. The inmate must be recommended by the chaplain or his/her parole officer or case worker. Any restrictions placed on the inmate prior to the completion of the application process OR before a match with a mentor is made may be cause for the inmate to be deferred as a candidate for the this program. This application and its contents will be used by PTFM to create the best match possible between the inmate and his/her mentor. All contents of this application will be held in the strictest of confidence.

Name: _____ Institution: _____

Birth Date: (D/M/Y) ____/____/____ Birthplace: _____

Outside Address: _____

Marital Status: (Check one) Single Married Common-Law
 Separated Divorced Widower

Names and Ages of Children (under age 14): _____

Name of Spouse: (Optional) _____ Length of Current Sentence: _____

Residence of Closest Relative: City: _____ Province: _____

Do you have family support? YES NO
If yes, do they visit? YES NO How often? _____

At what age were you first involved in the criminal justice system? _____

Language: (Main) _____ Speak: _____ Write: _____

What was the last school grade you completed? _____
Do you have any post secondary education? YES NO

Name of Post Secondary Institution and Level Attained: _____

Work experience: (Check all that apply and briefly describe)

Casual (any type) _____ Self Employed _____
 Trade _____ Management _____
 Clerical _____ Professional _____
 Other _____

Interests: (List all that apply. Examples would be wood working, reading, cooking, fishing, hunting, sewing, art, hiking, camping, working out, etc.)

While inside:

Future plans on the outside:

What would your dream job be? _____

Date of arrest for current sentence: (M/Y) ____/____/____ Date of Sentencing: (M/Y) ____/____/____

Name of Case Worker or Parole Officer: _____

Eligibility Dates: Day Parole: (M/Y) ____/____/____ Full Parole: (M/Y) ____/____/____

Stat Release(M/Y) ____/____/____

Do you have any outstanding charges (warrants) before the courts? YES NO

If yes, please specify: _____

Have you ever participated in a mentoring program or ministry before? YES NO

If yes, which one? _____

How did you hear about the Pathways to Freedom Ministries Mentoring Program? _____

Why are you applying for a mentor? _____

What would you like the mentor to do with you and for you? _____

While on the inside this time, or during previous times, have you completed any Bible studies? YES NO

If yes, which ones? _____

Do you regularly attend chapel services or have the chaplain meet with you? YES NO

If no, why not? _____

Would you be interested in continuing the mentoring friendship upon your release? YES NO

Why or why not? _____

Do you have support from any other outside agencies? YES NO

If yes, list them and give details as needed:

Have you at any time during this incarceration, or previously, made a statement of faith in Jesus Christ?

(That is, received salvation or become Born Again; refer to Scripture John 3: 16.) YES NO

If yes please explain:

If no, is this something you have thought about?

YES NO

Please note: all mentoring is men to men, women to women or couple to client.

* All contents of this application will be held in the strictest of confidence.

Applicant (Inmate) Name: _____ Institution: _____

* While confidentiality between the mentor and the inmate friend is expected, there will be some exceptions.

If the mentor or volunteer coordinator for PTFM has reason to believe any of the following:

- that the inmate might harm him or herself or another;
- that any other persons may be at risk of harm;
- that anyone under the age of 18 is being physically, emotionally, sexually abused or exploited;

then he/she (the mentor or coordinator) has a legal and ethical mandate to report these things to the authorities and PTFM.

Inmates accepted for this program may be removed from the program at the discretion of the staff of the institution with just cause.

Please sign and date this application to show that you have read and understand all of the above statements.

Inmate Signature (Sign and Print)

Date

Chaplain/Parole Officer

Date

Thank you for your interest in Pathways to Freedom Ministries and the mentoring program. Part of the acceptance process for every inmate and mentor is an interview with PTFM staff. Please understand that all rules, regulations and guidelines that apply at the institution where you are housed will apply to your mentor and the mentoring friendship.

Thank You,

Nancy Hynes
Director – Pathways to Freedom Ministries