



**Dawson County Sheriff's Office**  
**709 North Grant**  
**Lexington, NE 68850**  
**308-324-3011 / Jail 308-324-2279**

**Jail Clearance Application for Ministerial/Volunteers/Officials**

(Please print clearly)

Last Name	First Name	M.I.	Date of Birth
Address	City	State	Zip
Home Phone	Work Phone	Cell Phone	

Specify purpose for clearance request	
Employer or Program Representing	Position or Role

Reference #1 Name	Phone #	Address
Reference #2 Name	Phone #	Address

Church Affiliation (if applicable)	Pastor	Church Phone #
------------------------------------	--------	----------------

Application Status:	Clergy	Lay Minister
---------------------	--------	--------------

Dawson County Sheriff's Office Approval Yes                  No	By:	Date:
---	-----	-------



Dawson County Sheriff's Office  
709 North Grant  
Lexington, NE 68850  
308-324-3011 / Jail 308-324-2279

## **Prison Rape Elimination Act**

### **Acknowledgement Form**

The Prison Rape Elimination Act (PREA) is a federal law established to address the elimination and prevention of sexual assault and sexual harassment within correctional systems and detention facilities. This Act applies to all correctional facilities, including prisons, jails, juvenile facilities, and community corrections residential facilities. PREA incidents involve the following conduct:

- Inmate-on-inmate sexual assault
- Inmate-on-inmate abusive sexual contact
- Staff sexual misconduct with an inmate
- Staff sexual harassment of an inmate

The Act aimed to curb prison rape through a "zero-tolerance" policy, as well as through research and information gathering. The Dawson County Jail has ZERO-TOLERANCE relating to the sexual assault/rape of inmates and recognizes these inmates as crime victims. Due to this recognition and adherence to the federal Prison Rape Elimination Act (PREA) zero-tolerance extends to the following:

- Any Volunteer, Contractor/Subcontractor, Attorney, Interpreter, Probation Officers, Counselor, Social Worker, Ministerial Official, or other persons having physical contact with inmates.

Any person having physical contact with inmates is prohibited from sexual misconduct and/or harassment of an inmate.

I acknowledge that I have been provided information on the Prison Rape Elimination Act and have been informed that sexual conduct between any person entering the jail and an inmate is prohibited. Sexual harassment or sexual misconduct involving an inmate is a violation of Dawson County PREA policies and may result in criminal prosecution.

I acknowledge that the Dawson County Sheriff's Office is required to run a background check on me yearly and that I will be responsible for renewing the Dawson County ID badge before date of expiration stated on badge if I wish to have continued authorization to enter the Dawson County Jail. I understand that failure to renew will result in denial of entry into the Dawson County Jail.

I agree to report such misconduct to the Dawson County Sheriff's Office.

Name (print) \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_