New Jersey Department of Corrections Department of Children and Families (DCF) Visit Request Form

Date of request: Click here to enter a date.	Facility: Choose an item.
DCF requester: Click here to enter text.	Title: Click here to enter text.
DCF office address: Click here to enter text.	
Area code and phone: Click here to enter text	t. Fax: Click here to enter text.
Mobile phone number of DCF escort: Clic	k here to enter text.
Proposed visit date: Click here to enter text.	Select time slot: Choose an item. All visitors must arrive 20 minutes prior to visit
Visit duration requested: Choose an item.	
Name of inmate/parent: Click here to enter to	ext. SBI#: Click here to enter text.
VISITOR'S INFORMATION	
Name of DCF escort: Click here to enter tex	tt. Title: Click here to enter text.
The visiting escort: Choose an item.	
Name of child(ren): (if there are additional nam	es please attached a separate sheet)
1. Click here to enter text. Age: Choose an item	a. Click here to enter text. Age: Choose an item.
2. Click here to enter text. Age: Choose an item	a. Click here to enter text. Age: Choose an item.
Accommodations: Choose an item. If other (please explain): Click here to enter te	ext.
*(please print, sign and fax or scan and email to the facility	ty)
DCF Staff Member (print)	Signature Date
For NJDOC Use Only	
NJDOC Social Services Rep. (print)	Signature Date
□ APPROVED or □ DENIED	
NJDOC Administrator/designee Sign	nature Date

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CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

GARY M. LANIGAN

Commissioner

New Jersey Department of Corrections (NJDOC) Department of Children and Families (DCF) Visit Request and Visit Procedures

Please note the following procedures when requesting a DCP&P visit:

- 1) The DCF worker shall complete a DCF Visit Request Form and fax it to NJDOC with a copy of the original court order (if applicable).
- 2) A completed DCF Visit Request Form (attached) shall be received by Administration a minimum of **three (3) days business days** prior to the requested visit date.
- 3) The DCF worker shall provide exact names of the staff escort and the names of the children visiting. If the escort is from a contracted agency, NJDOC shall be made aware of the name and the agency information. All staff shall bring their agency ID. In addition, contracted employees shall also provide a state issued photo ID.
- 4) The DCF worker shall provide the facility with information regarding any medical needs, or any other special needs or supplies, required for the visit. (see Request Form)
- 5) Each specific visit date shall be scheduled. It cannot be assumed that visits will occur on an ongoing basis. The exact dates and times shall be coordinated in writing between NJDOC and DCF. All visits shall be occur Monday Friday, between the hours of 8:30 10:30 am or 1:00 3:00 pm.
- 6) Once the completed request form is received, NJDOC shall provide written confirmation of all approvals or denials for requested visit dates.
- 7) The DCF worker may call to verify that the inmate is present on the day of each scheduled visit. When calling, the DCF worker shall clearly identify as such, and provide their scheduled visit time.
- 8) Any requests to change visit plans, after the approval has been received, shall be presented to NJDOC as soon as possible.
- 9) Any individuals who are not scheduled, and who do not have proper ID, or can not clear the view scan, shall not be permitted to enter the facility.
- 10) The DCF escort and child(ren) shall arrive **20** minutes prior to the scheduled visit time. If delayed, the DCF escort shall call as soon as possible. Please note: if the DCF escort is late arriving to the facility, it is possible the visit may have to be rescheduled. In addition, if the visit commences late, it will not extend beyond the original termination time.
- 11) If a visit time frame is not specified on the court order, the visit duration may be up to 2 hours, if permitted by Administration. Should multiple DCF visits be scheduled at the same facility for the same day, all visits will begin and end at the same time, as directed by Administration.
- 12) The custody status of the incarcerated parent shall dictate whether the visit will be a "contact" or "non contact" visit. A non-contact visit takes place in a location where a glass partition separates the incarcerated parent and the visitor(s). The contact visit takes place where no physical partition separates the visitor(s) and incarcerated parent.
- 13) The DCF worker must remain with the child(ren) throughout the entire visit.

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- 14) When necessary, the DCF worker, not the incarcerated parent, will escort the child(ren) to the lavatory.
- 15) **Visitor Dress Code**: Proper attire is regarded as a condition of admission to a New Jersey Department of Corrections facility. The following items are **not authorized** to enter the Visit Program visiting areas:
 - Cell phones, beepers or other electronic devices.
 - Credit cards, bank access cards, etc.
 - Condoms, cosmetics, candy and cigarettes.
 - Drugs (prescribed or otherwise) (Asthma inhalers and other life sustaining medications must be clearly marked and surrendered to the Visit Supervisor prior to entering the visit area).
 - Keys (with the exceptions of locker keys and/or one vehicle key no remotes or alarms).
 - Money (cash or coin).
 - Photographs.
 - Purses, handbags and wallets (<u>clear</u> plastic clutch bags or <u>clear</u> zip-lock sandwich bags may be utilized for authorized items).
 - Sunglasses (non-prescription).
 - Transportation passes.
 - Weapons or sharp objects.
 - Any item deemed to be a threat to the orderly running of the institution.

The following prohibited visitor garment guidelines must be followed, regardless of gender:

- No transparent or fishnet clothing.
- No clothing that exposes undergarments or a portion of the body considered private.
- No skin-tight clothing.
- Tops must cover shoulders and midriff areas. No tube tops, tank tops, halter tops, low-cut shirts or shirts that expose shoulder, midriff area, torso or back.
- Bottoms must at least cover waist to mid-thigh. No shorts, skirts or dresses ending above mid-thigh, or which have an inseam length or slit ending more than three inches above the knee. No low-rise shorts, skirts or pants that expose the midriff or any portion of the buttocks.
- No otherwise clearly inappropriate attire, as determined solely by New Jersey Department of Corrections staff on duty. This includes, but is not limited to:
- Military-style clothing worn by persons not in active or reserve military status
- Clothing closely resembling that issued to inmates, custody staff or law enforcement
- Professional-styled uniforms such as but not limited to: medical/nursing, postal workers delivery service, etc.
- Clothing depicting a message, either in wording or art, that could impact upon the safety, security or orderly
 operation of the correctional facility, including, but not limited to, that which is offensive, racist, sexually
 oriented, or advocates illegal or narcotic activities
- No hat or headgear, unless it is religiously oriented or medically necessary, and the visitor agrees to a search of same
- No shoes or sneakers with wheels (i.e.: Heelys).
- No flip-flops
- No steel-toed boots

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New Jersey Department of Corrections Division of Programs and Community Services Office of Transitional Services (Social Service Department) Contact list

Director: Suzanne Lawrence, LCSW Tel# 609-292-4036 ext 5632 Fax 609-292-0029

Program Specialist IV Leanne Cook, MSW ext 5307 Rosalind Williams, LSW ext 5302

Social Worker Supervisors

A.C. Wagner Youth Correctional Facility Tel# (609)291-1619 Fax# (609) 298-1749 Amy Southwick, MSW

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Mountainview Youth Correctional Facility Tel# (908)638-7620 Fax# (908) 638-4423 Amy Davis, LCSW

Northern State Prison Tel# -(973)465-0068x4852 Fax# (973) 465-5298 Mozelle Clyburn, MSW Adult Diagnostic & Treatment Center Tel# (732).574.3250 x8032 Fax# (732) 382-8912 Crescent Clarkson, LCSW

Central Reception & Assignment Facility Tel# (609)984-6440 Fax# (609) 777-5776 Euri Maya-Kidwell, MSW

Edna Mahan Correctional Facility Tel# (908) 735-3640 Fax# (908) 238-0494 Amelia Renshaw, LCSW

Southern State Correctional Facility Tel# (856)785-6621 Fax# (856) 785-0764 Rebecca Smith, MSW

New Jersey State Prison Tel# (609)-341-4622 Fax# (609) 943-3151 Crystal Raupp, LCSW

Southwoods State Prison Tel# (856) 459-7000 ext 8230 Fax# (856) 459-8211 Dr. Danielle Bennett, MSW, Ph.D.

All email exchanges (first name).(last name)@ doc.nj.gov
If the Supervisor is unavailable please ask to speak to the Assistant Social Work Supervisor (ASWS)