



NOTE : Reference document [CD 559](#)

PERSONAL INFORMATION BANK

PUT AWAY ON FILE ► Offender VC File

VISITING APPLICATION

TYPE OF REQUEST ► New Update Renewal

Family name (name of inmate you wish to visit)	Given Name(s)
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NOTE: Shaded areas are for office use only

CPIC CHECK COMPLETED Yes No

FPS Number ►	Date of Birth (YYYY-MM-DD) ►	
Institution	Region	Completing Operational Unit

IMPORTANT

PLEASE READ THIS FORM CAREFULLY AS FAILURE TO COMPLETE THIS FORM COULD RESULT IN DELAYS OF APPROVAL PROCESS. Answer all questions and sign in the applicable spaces. You are required to submit **TWO** current photographs of yourself that contain a view of your full face, head and shoulders only (minimum size: 5cmX 3.5cm / 2"x 1½"). You are also required to submit a **PHOTOCOPY** of **TWO** current government issued ID's, at least one of those must be photo ID (i.e. Driver's Licence, Health card, etc.) **YOU WILL NEED TO PROVIDE THAT ID WHEN YOU COME FOR THE VISIT.** Lastly, you must complete the Institutional Access CPIC Clearance Request Form in order to request access to the institution. This form is located on the same page that the visiting application is located. **All applications must be submitted by mail, addressed to the Visits and Correspondence unit of the institution you wish to visit. No fax or electronic copies will be accepted.**

Please visit the following website for a list of the mailing addresses of CSC facilities: <http://www.csc-scc.gc.ca/etablissemments/001002-0001-eng.shtml>

NOTE: Failure to complete the form fully will result in delays in the visitor approval process. Providing false information is sufficient to deny access.

PRIVACY ACT STATEMENT

Personal information about you is collected under the authority of the *Corrections and Conditional Release Act* (CCRR) to review your suitability for visiting privileges at the CSC. This information is collected, with no obligation on your part, and held in the Visits and Correspondence Bank; however, your refusal to comply would result in the denial of visiting privileges. This information cannot be disclosed to other persons without your consent EXCEPT where disclosure would be justified pursuant to one of the paragraphs of subsection 8(2) of the *Privacy Act*. As authorized by paragraph 8(2)(b) of the *Privacy Act*, if your visits are refused or suspended, the reasons for the refusal or suspension will be disclosed to the inmate you are requesting to visit, in accordance with paragraph 91(2)(b) of the CCRR.

INFORMATION ON APPLICANT

Your name			Maiden name (if applicable)		
Family name		Given names (in full)			
Your date of birth (YYYY-MM-DD)		Your place of birth		Province/Country	
City/Town					
Civic Address					
Number	Street	Apt. #	City	Province	Postal code
Is the mailing address the same as the civic address? <input type="radio"/> Yes <input type="radio"/> No					

Name	FPS
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If no, provide mailing address

Home telephone number	Work	Other than home
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License plate number	Your physical description		
	Height	Weight	Colour of hair
			Colour of eyes

I am the inmate's

Father Mother Spouse Common-law partner Brother
 Sister Son Daughter I am a victim of an offence committed by this offender
 Other (friend, cousin, aunt, uncle, etc.)

► Specify type and length of relationship

Explain if extenuating circumstances

Please indicate which two pieces of Government-issued identification you will be using when visiting the institution. A photocopy of these IDs must be provided along with this application.

Emergency contact name (print)	Telephone
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Do you also want to apply for video visits? Yes No

If yes, please provide your email address

Reason(s) why video visitation is requested

Are you on another inmate's visiting list? Yes No

If YES, state inmate's name, your relationship to them and which institution they are located at.

Name	FPS
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Are you a volunteer visitor at this or any other institution? Yes No

If YES, state the name of the group or program you take part in and the institution's name.

Please provide the first and last names and date of birth of any children under the age of majority for whom you are requesting visiting privileges. Please see CD 559 – Annex B for the age of majority in each province (see also section 5 of Acknowledgement and Consent on page 4).

First and Last name(s) (print)	Date of Birth (YYYY-MM-DD)

Are you the parent/legal guardian of the children listed above? Yes No

If yes, you may be requested to provide documentation to validate that you are the parent/legal guardian (e.g. long-form birth certificate, court document, etc.).

If no, you must provide a signed consent letter concerning a minor from the child's custodial parent/legal guardian with your application to confirm that you have their authorization to accompany the minor child into the institution.

CORRECTIONS AND CONDITIONAL RELEASE ACT (Excerpts)

45. Every person commits a summary conviction offence who:
- a) is in possession of contraband beyond the visitor control point in a penitentiary;
 - b) is in possession of anything referred to in paragraph (b) or (c) of the definition "contraband" in section 2 before the visitor control point at a penitentiary;
 - c) delivers contraband to, or receives contraband from, an inmate;
 - d) without prior authorization, delivers jewellery to, or receives jewellery from, an inmate; or
 - e) trespasses at a penitentiary.

"Contraband" means:

- a) an intoxicant,
- b) a weapon or a component thereof, ammunition for a weapon, and anything that is designed to kill, injure or disable a person or that is altered so as to be capable of killing, injuring or disabling a person, when possessed without prior authorization,
- c) an explosive or a bomb or a component thereof,
- d) currency over any applicable prescribed limit, when possessed without prior authorization, and
- e) any item not described in paragraphs (a) to (d) that could jeopardize the security of a penitentiary or the safety of persons, when that item is possessed without prior authorization.

60. (1) A staff member may conduct a frisk search of a visitor where the staff member suspects on reasonable grounds that the visitor is carrying contraband or carrying other evidence relating to an offence under section 45.
- (2) Where a staff member
- (a) suspects, on reasonable grounds that a visitor is carrying contraband or carrying other evidence relating to an offence under section 45, and believes that a strip search is necessary to find the contraband or evidence, and
 - (b) satisfies the institutional head that there are reasonable grounds
 - (i) to suspect that the visitor is carrying contraband or carrying other evidence relating to an offence under section 45, and
 - (ii) to believe that a strip search is necessary to find the contraband or evidence, a staff member of the same sex as the visitor may, after giving the visitor the option of voluntarily leaving the penitentiary forthwith, conduct a strip search of the visitor.
- (3) Where a staff member believes on reasonable grounds that a visitor is carrying contraband or carrying other evidence relating to an offence under section 45 and that a strip search is necessary to find the contraband or evidence,
- (a) the staff member may detain the visitor in order to
 - (i) obtain the authorization of the institutional head to conduct a strip search, or
 - (ii) obtain the services of the police; and
 - (b) where the staff member satisfies the institutional head that there are reasonable grounds to believe

Name	FPS
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CORRECTIONS AND CONDITIONAL RELEASE REGULATIONS (Excerpts) Cont'd...

- (i) that the visitor is carrying contraband or carrying other evidence relating to an offence under section 45, and
 - (ii) that a strip search is necessary to find the contraband or evidence, the institutional head may authorize a staff member of the same sex as the visitor to conduct a strip search of the visitor.
- (4) A visitor who is detained pursuant to subsection (3) shall
- (a) be informed promptly of the reasons for the detention; and
 - (b) before being searched, be given a reasonable opportunity to retain and instruct counsel without delay and be informed of that right.

Searches of Visitors

54. (1) A staff member may conduct a routine non-intrusive search or a routine frisk search of a visitor, without individualized suspicion, where the visitor is entering or leaving the penitentiary.
- (2) If a visitor refuses to undergo a search referred to in subsection (1), the institutional head or a staff member designated by the institutional head may
- (a) prohibit a contact visit with an inmate and authorize a non-contact visit; or
 - (b) require the visitor to leave the penitentiary forthwith.

Visits

- 91 (1) Subject to section 93, the institutional head or a staff member designated by the institutional head may authorize the refusal or suspension of a visit to an inmate where the institutional head or staff member suspects on reasonable grounds
- (a) that, during the course of the visit, the inmate or visitor would
 - (i) jeopardize the security of the penitentiary or the safety of any person, or
 - (ii) plan or commit a criminal offence; and
 - (b) that restrictions on the manner in which the visit takes place would not be adequate to control the risk.
- (2) Where a refusal or suspension is authorized under subsection (1),
- (a) the refusal or suspension may continue for as long as the risk referred to in that subsection continues; and
 - (b) the institutional head or staff member shall promptly inform the inmate and the visitor of the reasons for the refusal or suspension and shall give the inmate and the visitor an opportunity to make representations with respect thereto.

ACKNOWLEDGEMENT AND CONSENT

1. I understand that the Correctional Service of Canada has the sole right to determine my suitability as an inmate's visitor. I further understand that approval of visiting privileges is conditional upon satisfactory results of a criminal record name check. By completing the Visiting Application and Institutional Access CPIC Clearance Request Form, I give my consent to the Correctional Service of Canada to complete a criminal record check. To this end, I certify that the information I have submitted is true and accurate to the best of my knowledge, and I agree to notify institutional authorities immediately should there be any changes to that information. I understand that I will need to submit an updated Visiting Application and Institutional Access CPIC Clearance Request Form every two years as per CD 559 to continue to participate in visits. I acknowledge that the submission of false or misleading information or the failure to advise of changes may result in refusal or suspension of my visiting privileges for an indefinite period. Finally, I agree to observe all stated rules, regulations and policies while visiting this institution and understand that the failure to do so may likewise result in suspension of my visiting privileges for an indefinite period.
2. I understand that before each visit, I may be subject to a search as per CCRA and CCRR. Furthermore, I understand that if I refuse to be searched, I may be denied access to the institution or that a contact visit may be replaced with a non-contact visit or other restrictions on the manner in which the visit takes place.
3. I understand that my communications with an inmate in the course of a visit may be listened to or otherwise intercepted by a staff member or mechanical device.
4. I understand that if I am refused or suspended as a visitor, the reasons for the refusal or suspension will be shared with both myself and the inmate, pursuant to paragraph 91(2)(b) of the CCRR. By submitting this application, I consent to the disclosure of the reasons for refusal or suspension to the inmate I am requesting to visit. I understand that the inmate and I will be given an opportunity to make representations with respect to the decision.

Name (Print)	Signature of applicant	Date (YYYY-MM-DD)
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Name	FPS
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For parents/legal guardians who wish visiting privileges for their children or wards

5. a) In consideration of my child or ward being granted visiting privileges, I consent to a search of their person by a walk-through scanner or hand-held scanning device, and to a search of his/her personal property, in accordance with the procedure outlined in section 60 of the CCRA.

b) I understand that the institution may consider it necessary that my child or ward be subjected to searches as per CD 566-8 Searching of Staff and Visitors and for this purpose.

I hereby consent to such searches being performed.

OR

I wish to be contacted for my consent prior to such searches being performed.

Furthermore, I require do not require That I or another accompanying adult be present when such searches take place.

Name (Print)	Signature of parent or legal guardian	Date (YYYY-MM-DD)
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FOR OFFICE USE ONLY

Received by	
Date received (YYYY-MM-DD)	Name (print)

Title	Signature
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Visits Review Board	
Date reviewed (YYYY-MM-DD)	<input type="radio"/> Approved <input type="radio"/> Refused

Comments

Name (print)	Title	Signature
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The applicant was informed of the decision:		
Date (YYYY-MM-DD)	By: Print Name	Signature

The inmate was informed of the decision:		
Date (YYYY-MM-DD)	By: Print Name	Signature