

Luzerne County Correctional Facility  
Volunteer/Contractor Statement of Understanding of PREA

I have been given the Luzerne County Division of Corrections' PREA brochure. By signing below, I am stating that I have read the brochure, understand what is required of me and have had all questions answered by staff. Furthermore, I understand that the Luzerne County Division of Corrections has adopted the following policies required by PREA:

The Luzerne County Division of Corrections has established a "Zero-Tolerance" policy on all matters regarding sexual abuse and sexual harassment.

In maintaining this "Zero-Tolerance policy, all reports of sexual abuse and harassment must be reported to the facility's administration for investigation.

While volunteering at the Luzerne County Division of Corrections, I am an agent of the facility when dealing with inmates and I must abide by all facility policies and procedures.

I understand that if an inmate reports an allegation of sexual abuse to me, it is my obligation to report this to facility's staff.

I understand that I must inform the victim how to preserve physical evidence by instructing them not eat, drink, brush teeth, urinate, defecate and change clothing until that evidence may be collected.

Print \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_.  
(volunteer/contractor)

Print \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_.  
(staff)