



WYOMING DEPARTMENT OF CORRECTIONS	WDOC Form #531	Page 1 of 2
	Visitor Application	Last Revised: 1/23/12

This application must be filled truthfully and completely for each and every individual the inmate is requesting as a visitor, including children under the age of eighteen (18). This form must be either typed or printed clearly and legibly. Please note that individual identification information is collected and retained for the sole purpose of visitor application review and approval, including background checks. It will not be used for other purposes.

Upon completion, mail or fax this form to the appropriate facility (see page 2).

Name of inmate: _____ WDOC #: _____ Facility: _____
 Your name (First, Middle, Last): _____
 Social Security Number: _____
 Maiden name: _____ Other names used: _____
 Date of birth: _____ Place of birth: _____
 Driver's license #: _____ State issued: _____
 Other I.D. #: _____

Current address: _____
 Street City State Zip

Phone number, including area code: _____

Mailing address
 (if different then above): _____
 Street City State Zip

Other states/countries you have resided in over past ten (10) years: _____

Relationship to inmate: _____ Length of time you've known this inmate: _____

Do you visit any other inmate here or at any other WDOC facility? Yes No
 If yes, who and where? _____

Are you a certified victim that receives information under the victim notification program? Yes No
 If yes, what is/are the offender(s) name? _____

Are you an approved volunteer or religious coordinator at any WDOC facility? Yes No
 If yes, which facility? _____

Race: _____ Sex: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Marital Status: Married Single Divorced Other – Explain: _____

Occupation: _____ Employer: _____ Work Phone #: _____

Vehicle license plate #: _____ State issued: _____

Vehicle description Make: _____ Model: _____ Color: _____ Year: _____

Do you have a felony record? No Yes Offense: _____ Date: _____
 If yes, disposition: Jail Prison Probation

Are you currently on probation or parole? Yes No If yes, which state? _____



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Disclosure: There will be a criminal record check done on all visitors. A criminal record does not automatically exclude applications for visiting privileges. An inmate or prospective visitor who has intentionally submitted false information to the WDOC as part of the visiting application process will be denied visitation for at least one (1) year from the date of the denial of the application. Certain individuals may be ineligible for visitation privileges, per WDOC Policy #5.400, *Inmate Visiting*. Copies of this policy and the accompanying attachments are available at each correctional facility's visiting desk/reception area and on the WDOC's public website: <http://corrections.wy.gov>

I verify the information I have given is true and accurate to the best of my knowledge.

Applicant Signature: _____ Date: _____

Additional disclosure:

Inmates are responsible for informing their prospective visitor(s) whether the visiting application has been approved or denied, and for providing prospective visitors with the appropriate forms and visiting rules.

Additional information may be necessary to process this application. If additional information is requested from the applicant, and not received within ninety (90) days, the application will be denied.

Inquiries by prospective visitors regarding department decisions to approve or deny an inmate's visiting application must be in writing and directed to the facility warden or designee. WDOC employees will not respond to telephone inquiries by prospective visitors regarding department decisions to approve or deny an inmate's visiting application.

Completed applications and any accompanying information must be mailed/faxed directly to the correctional facility. Do not send applications to the WDOC Central Office in Cheyenne.

Wyoming State Penitentiary
P.O. Box 400
Rawlins, WY 82301
Fax: (307) 328-7464

Wyoming Honor Farm
40 Honor Farm Road
Riverton, WY 82501
Fax: (307) 856-2505

Wyoming Honor Conservation Camp and Boot Camp
P.O. Box 160
Newcastle, WY 82701
Fax: (307) 746-9316

Wyoming Women's Center
P.O. Box 300
Lusk, WY 82225
Fax: (307) 334-2254

Wyoming Medium Correctional Institution
7076 Road 55F
Torrington, WY 82240
Fax: (307) 532-3240

Casper Re-Entry Center
Therapeutic Community (100 Bed)
P.O. Box 2380, Mills, WY 82644
Fax: (307) 472-5310

For Official Use Only:

Results of N.C.I.C.: _____

Visitor application is denied. Reason: _____

Visitor application requires additional information. Explain: _____

Visitor application is approved.

WDOC Staff Signature: _____ Date: _____