

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**VISITOR APPLICATION FOR VISITING PRIVILEGES**

*Read carefully. Please type or print with black ink. All questions must be answered. Any omissions or falsifications will be considered sufficient reason for denial of all privileges. This form must be submitted for renewal every two (2) years.*

Facility: \_\_\_\_\_

1. Name of inmate you wish to visit: \_\_\_\_\_ NMCD #: \_\_\_\_\_

2. Visitor Name: \_\_\_\_\_  
Last First Middle

3. Social Security #: \_\_\_\_\_ (Sex): Male: \_\_\_\_\_ Female: \_\_\_\_\_

4. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Mo. Day Yr. City State

5. Mailing Address: \_\_\_\_\_  
P.O. Box/Street City State Zip Code

6. Email Address: \_\_\_\_\_

7. Phone Number: ( ) - Maiden Name: \_\_\_\_\_

8. Relationship to inmate: \_\_\_\_\_ I have known this inmate for: \_\_\_\_\_  
(Length of time)

9. Marital Status: ( ) Married ( ) Single ( ) Widow ( ) Divorced

10. I am currently on the visiting list for the following inmate(s): (This will not disqualify your visiting)

Inmate Name	NMCD #	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. I have / have not (circle one) been employed by the NMCD or any Department contractors (i.e. Food Service, Medical, etc.) If so where: \_\_\_\_\_ When: \_\_\_\_\_

12. Have you ever been charged with or arrested for a felony/misdemeanor and/or convicted of a felony/misdemeanor?  
( ) Yes ( ) No

If so where: \_\_\_\_\_ Offense(s): \_\_\_\_\_

When: \_\_\_\_\_ Final Disposition: (Circle one) Dismissal Probation Parole Incarceration

13. I am now on probation/parole (circle one if applicable). If you are currently on probation you must have approval of your Probation or Parole Officer and present a travel permit signed by your Probation or Parole Officer in order to visit any NMCD Facility.

Probation/Parole Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

14. I am currently employed / unemployed / retired / disabled (circle one). If employed, please list employer below.

Occupation/Business: \_\_\_\_\_

Address of Employer/Business: \_\_\_\_\_

15. **READ CAREFULLY!** If you are under 18 years of age, you must have the signature of your parent or guardian sign on the signature line. If over 18, please sign as applicant.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**VISITOR STATEMENT OF UNDERSTANDING**

It is a violation of New Mexico State law for any person to introduce, or attempt to introduce, any article of contraband including deadly or explosive materials, currency, weapons, ammunition, alcohol or controlled substances into a correctional facility.

All visitors will be questioned upon their arrival at point of entry, to determine whether they possess any of the above items. Detection devices used at this facility may include the use of the New Mexico Corrections Department Canine Unit (dogs trained in the detection of controlled substances) and/or mechanical drug detection devices. Search regulations may be enforced at any time while you are on institutional grounds; refusal to submit to a strip search will result in the cancellation or suspension of the visit. Major violations of visiting regulations including the use, possession, distribution or attempts to introduce or introduction of alcohol, controlled substances or other contraband will result in the loss of visiting privileges. Minor violations may result in suspension or even a termination of visiting privileges.

Vehicle/Visitor searches shall include:

1. Search of all vehicle contents, including, but not limited to, purses, coats, briefcases, diaper bags, loose articles of clothing, children's toys, etc.
2. Hair shall be visually inspected, including requiring the visitor to shake out and/or run their fingers, comb or hair pick through their hair.
3. All persons in the vehicle will allow the traffic control officer to look into their mouths to ensure that it is free of contraband.
4. A thorough pat search may be conducted of all persons, including children. If alcohol, controlled substances or contraband is detected on any visitor, including an infant or a child, visiting will not be allowed.
5. Pedestrians entering for the purpose of visiting with inmates are subject to the same search regulations as persons in vehicles.
6. Parents/Guardians will be required to change an infant's diaper prior to the visit in the presence of a correctional officer of the same sex as the parent.

All persons entering the correctional facility will be required to pass through a metal detector and/or controlled substance detection equipment or screened by dogs trained in the detection of controlled substances. All packages and items carried into the institution are subject to search by correctional employees and/or State or County law enforcement officials.

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**VISITOR STATEMENT OF UNDERSTANDING**

You are hereby informed prior to entering the institution that you may be subject to search and must sign a statement to that effect. If you choose not to enter, you will not be subjected to a search, and will be escorted from institutional grounds immediately. Where there is a reasonable suspicion that a particular visitor is attempting to introduce contraband into the institution, the Warden on duty at the facility may order that the visitor be subjected to a more thorough search. A visitor may be requested to remove their clothing to submit to a strip search only where the Warden of the institution determines that there is probable cause to believe that the particular visitor possesses contraband. In such an instance, the search may be conducted only by an employee of the same sex as the visitor in an area that provides the visitor the greatest possible privacy.

**ACKNOWLEDGEMENT OF VISITING RULES**

In order to be approved for visiting, you are required to print or type and then sign your name in the designated spaces, attesting that you have read and understand the Visitor Statement of Understanding. The completed acknowledgement must be returned with your completed visitor application questionnaire. Failure to complete these forms may cause your application to be disapproved. This form must be submitted for renewal every two (2) years.

**I HAVE READ, OR HAVE HAD READ TO ME, THE VISITOR STATEMENT OF UNDERSTANDING AND I UNDERSTAND ALL OF THE INFORMATION.**

Signature of Parent or Guardian (if under 18): \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed/Typed Name of Applicant: \_\_\_\_\_

Driver's License / I.D. #: \_\_\_\_\_

(For those without a Driver's License or ID, applicant may provide two alternate forms of ID verification, one of which must contain applicant's picture.)

Vehicle Type: \_\_\_\_\_ Plate #: \_\_\_\_\_

Inmate to be visited:

\_\_\_\_\_  
NAME NMCD # Facility

**\*\*\*NMCD STAFF ONLY\*\*\* DO NOT WRITE BELOW LINE**

**Final Disposition:** Date received by the facility: \_\_\_\_\_

( ) Approved for Visit ( ) Denied Visiting Privileges ( ) Returned for Completion

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

