

## INMATE WORKER APPLICATION

### PERSONAL INFORMATION

Name: \_\_\_\_\_

(last) (first)  
(middle)

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Sex: M / F Race: \_\_\_\_ Height/Weight

\_\_\_\_\_  
mo. day year

Address: \_\_\_\_\_

number/street city  
zip

I.D. # \_\_\_\_\_ State \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_  
home cell

### EMERGENCY CONTACT INFORMATION

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_  
home cell  
other

Address: \_\_\_\_\_

number/street city  
zip

### MEDICAL INFORMATION

**Medical Problems:** \_\_\_\_\_

**Physical Limitations:** \_\_\_\_\_

**Applicant Signature:**

**Date:**

Revised: 9/10

**PROGRAM INFORMATION**

◆ **You must provide a Jail Commitment Order from the court.**

**PROGRAM QUALIFICATIONS**

**YOU MUST MEET THE FOLLOWING CONDITIONS TO BE CONSIDERED**

- ◆ **You must be male. The program is NOT available to females.**
- ◆ **No prior serious convictions, (violence/drugs)**
- ◆ **No medical problems or physical limitations**
- ◆ **Not currently taking medication.**

**COST OF THE PROGRAM**

**Administrative Fee: \$100.00**

**Daily Fee (each 24 hours): \$75.00**

**Payment must be made when you check in to serve your time. Payment must be made in the form of a Cashiers Check or Money Order, payable to “City of Huntington Park”.**

**No cash or personal checks are accepted.**

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<b>HOW TO APPLY</b>
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| <ul style="list-style-type: none"><li>◆ <b>Submit this application</b></li><li>◆ <b>Submit a copy of the Jail Commitment Order</b></li></ul> |
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<b>HOW TO CHECK THE STATUS OF YOUR APPLICATION OR SCHEDULE YOUR TIME</b>
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<b>Contact Lieutenant Lozano at (323) 826-6614. <u>You MUST call him.</u> He will NOT call you. A Records Clerk can provide you with the best hours to call him.</b>
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