



SITE ACCESS - VISITORS, CONTRACTORS OR VOLUNTEERS

Phone: 867-455-2900 Fax: 867-455-2992 Email: wcc-reception@yukon.ca

Address: 25 University Dr, Whitehorse YT Y1A5B6

READ CAREFULLY

Applicants are required to fully complete all sections of this application form and affix signatures in the designated areas. Submit the finalized application to the email or physical address specified at the top of this document. Be advised that incomplete submissions may result in delays in the visitor approval process. Furthermore, the provision of false or misleading information constitutes grounds for immediate denial of access to the Whitehorse Correctional Centre.

Yukon Access to Information and Protection of Privacy Act statement

Personal data is collected under the legal authority of the Yukon *Corrections Act* for the sole purpose of assessing eligibility for visitation rights at the Whitehorse Correctional Centre. Participation in this data collection process is entirely voluntary; however, failure to comply may result in the denial of visitation privileges. Confidentiality of the collected information is safeguarded and will not be disclosed to third parties without explicit written consent, except where such disclosure is permitted pursuant to the Yukon *Access to Information and Protection of Privacy Act*.

The information gathered serves the purpose of performing verification checks via the Justice Enterprise Information Network and, where applicable, the Canadian Police Information Centre databases. These checks aim to identify any existing no-contact orders or active criminal offence files that may be associated with the individual(s). The scope of these verification checks will vary depending on the specific nature of the intended visit, whether professional or personal.

Under the Records Retention Schedule established by the Whitehorse Correctional Centre, all data collected will be securely retained on-site for a period not exceeding two years. Individuals have the legal right to access and amend their personal information held by the Whitehorse Correctional Centre. For inquiries or to exercise this right, direct your communication to wcc-reception@yukon.ca or contact us at 867-455-2900.

1. Applicant information - personal information

Surname		Given name(s)	
Date of birth YYYY/MM/DD	Gender <input type="checkbox"/> Man/Boy <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Woman/Girl		
Height	Weight	Hair colour	Eye colour
Present address		City	Province/Territory
Postal code			
Government photo ID and ID number	Phone number	Email address	

Are there any present outstanding charges against you? Yes No

If yes, explain: _____

Check one: Personal visitor (continue to 2a) Professional visitor (continue to 2b)

2a. Applicant information - relationship to inmate / persons under 19

Which inmate are you visiting?

Surname: _____ First name: _____

What is your relationship to the inmate?

Persons under the age of 19 years must be accompanied by a parent or legal guardian.

List here the names and ages of your children (19 years and under) for whom you wish visiting privileges:

Name and relationship to applicant	Date of birth	ID type and number
	YYYY/MM/DD	
	YYYY/MM/DD	
	YYYY/MM/DD	

2b. Applicant information - company/organization affiliation Check one: New Renewal

Company/Organization

Describe the nature of your business within the Whitehorse Correctional Centre.

Supervisor's name

Supervisor's number(s)

Acknowledgement and consent

I, the undersigned, acknowledge and understand that the Whitehorse Correctional Centre retains the exclusive authority to assess and determine my eligibility for visiting privileges within the facility. I hereby grant explicit consent to the Whitehorse Correctional Centre to utilize the information provided in this application form for the purpose of conducting a requisite verification check.

For individuals visiting in a professional capacity, I comprehend that the verification process will be executed exclusively through the Judicial Enforcement Information Network database, which is maintained by the Yukon Territorial Court. I acknowledge that this does not constitute a comprehensive criminal record check.

For individuals visiting in a personal capacity, I comprehend that the verification process will be executed through both the Judicial Enforcement Information Network and the Canadian Police Information Centre databases. This is to ascertain the absence of any existing no-contact orders or active criminal offence files pertaining to me.

I hereby certify that all information provided in this application is accurate and complete to the best of my knowledge and understanding. I commit to promptly notifying the Whitehorse Correctional Centre authorities of any subsequent changes to the information provided. I am aware that the provision of false or misleading information or the failure to update such information may result in the indefinite denial or suspension of my visiting privileges.

I agree to fully comply with all established rules, regulations, and policies of the Whitehorse Correctional Centre during my visits. I understand that non-compliance may result in the indefinite denial or suspension of my visiting privileges.

Upon the granting of visiting privileges, I consent to undergo a search procedure prior to each visit in accordance with the Whitehorse Correctional Centre's Policies and Procedures. I acknowledge that refusal to submit to such a search will result in the denial of access to the Whitehorse Correctional Centre.

In the event that my child or legal ward is granted visiting privileges, I hereby consent to a search of their person via a walk-through scanner or hand-held scanning device, as well as a search of their personal belongings. I acknowledge that the Centre reserves the right to conduct more thorough searches of my child or legal ward if deemed necessary.

Signature of applicant

Date

YYYY/MM/DD