IDAHO DEPARTMENT OF CORRECTION Visiting Application (Minor Child)

Resident's Name:	IDOC Number:I	nstitution:
Is this a renewal application? ☐ Yes ☐ No		
Child's name:	Date of birth:	SSN:
Relationship to the resident:		
In the legal and physical custody of: Both natural parents Mother Father		
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Relationship to the resident:		
In the legal and physical custody of: $\ \square$ Both	natural parents 🗌 Mother 🔲 Fa	ather
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Relationship to the resident:		
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Child's name:	Date of birth:	SSN:
Relationship to the resident:		
In the legal and physical custody of: Both natural parents Mother Father		
Mother's name (or legal guardian):Address:		
Father's name (or legal guardian):Address:		
I,, and (Custodial Parent or Legal Guardian's signature)		give our consent for the
above named minor children to visit, to the Idaho Department of Correction (IDOC)		, a resident sentenced
Notary Section		
State of		
County of		
On this day of, 20, personally appeared before me		
, known to me	e to be the person whose name is	s subscribed to the
(Name of affiant) foregoing instrument, and swore and acknowle in the capacity therein expressed, and that the		
 Notai	ry Public for Idaho	
	ding at	, Idaho
Commission expires:		

Instruction: If the applicant is under 18 years of age, the parent or guardian accompanying the child on the visit must also submit the following: *Visiting Application (Adult)*, and a certified copy of the child's birth certificate. In addition, **Guardians** must also submit a copy of the court order granting legal guardianship or a completed *Power of Attorney Delegating Limited Powers for Visitation* form. All applications expire one year from the date submitted. A minor child's application, after the initial approval, expires on the minor's 16th birthday, unless terminated earlier by the facility head or designee, minor, **or** parent/guardian. Each applicant is responsible for resubmitting a new updated application within these timeframes.