RETURN TO U.S. Census Bureau Governments Division Washington Plaza, Bldg. 2 Room 509 Washington, DC 20233-6800 FORM **CJ-3F** (3-15-2006)

2006 CENSUS OF JAIL FACILITIES Jurisdiction Form

U.S. DEPARTMENT OF JUSTICE
BUREAU OF JUSTICE STATISTICS
AND ACTING AS COLLECTION AGENT
U.S. DEPARTMENT OF COMMERCE
ECONOMICS AND STATISTICS ADMINISTRATION

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DATA SUPPLIED BY										
Name			Title							
OFFICIAL	Number and s	Number and street or P.O. box/Route number				State	ZIP Code			
ADDRESS										
TELEPHONE	Area code	Number	Extension	FAX	Area Code	Number				
TELEFIIONE				NUMBER						
E-MAIL										
ADDRESS										

(Please correct any error in name, mailing address, and ZIP Code)

GENERAL INFORMATION

- If you need assistance, call the U.S. Census Bureau toll-free at 1-800-253-2078, or e-mail govs.jails@census.gov.
- Please complete the questionnaire before May 15, 2006 using the web-reporting option at http://harvester.census.gov/jail/, or by mailing the completed form to the U.S. Census Bureau in the enclosed envelope, or by FAXing all pages toll-free to 1-888-891-2099.
- Please retain a copy of the completed form for your records.

What types of facilities are included in this census?

The census includes all confinement facilities administered by a local or regional law enforcement agency, which are intended for adults but sometimes hold juveniles.

- INCLUDE jails and city/county or regional correctional centers.
- INCLUDE special jail facilities operated under the authority of local or regional correctional authorities, such as medical/treatment/release centers, halfway houses, work farms, and private facilities operated under contract to local, regional, or Federal correctional authorities.
- INCLUDE temporary holding or lockup facilities if they are a part of your combined jail function.
- EXCLUDE temporary holding or lockup facilities that are not a part of your combined function from which inmates are usually transferred within 72 hours and not held beyond arraignment. If your only function is as a temporary holding or lockup facility, DO NOT complete this form. Contact Monica Hill at 1–800–253–2078.

Reporting instructions:

- Please complete this CJ-3F form on information pertaining to your entire jail jurisdiction.
- If the answer to a question is "not available" or "unknown," write "DK" in the space provided.
- If the answer to a question is "not applicable," write "NA" in the space provided.
- If the answer to a question is "none" or "zero, "write "0" in the space provided.
- When exact numeric answers are not available, provide estimates and mark (X) in the box beside each figure that is estimated. For example 1,234 X

Individual jail facility data

- Please complete a separate CJ-3F Addendum form for each individual jail in your jurisdiction.
- Use the enclosed blank CJ-3F Addendum forms for facilities not included with pre-addressed labels.

Burden statement

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 2 hours per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

Section I — FACILITY CHARACTERISTICS

1.	SU	ıpe	rvisio	n of	voui	rjail	v man jurisdi acilitic	icti	erso on w	ns u ⁄ere	nder	the
	•		INCLUDE persons on transfer to treatment facilities but who remain under your jurisdiction.									
	•	IN	CLUD	E pers	sons	held	for oth	er j	urisd	lictio	ns.	
	•	(e.	g., wo	rk rel	ease	, day	mmun release o jail a	e, d	rug/a			าร
	•	EX bo	CLUE arded	E per elsev	sons vher	unde e.	er your	jur	isdic	tion	who	are
	•	EX tra	CLUE nsfer	E inm	nates ner ju	on A ırisdi	WOL, ctions.	esc	ape,	or lo	ng-te	rm
	•	tw op	o or n erated	nore j d jails	urisd (unl	lictior ess fo	sed in f ns or th orm is l diction	nose beir	e held ng co	d in p mple	orivat eted	eľy
			Nui	mber	of pe	ersons	s held					
2.	W	as 1	the a	verag	je da	ily p	nd Ma opulat	tior	າ of a	all ja	il co	hat nfine-
	•	nu Ap	mber	of pe	rson: thro	s for (e daily each da Iarch 3	ay d	durin	g the	peri	od
			Ave	erage	daily	popu	ulation	L				
3.	He ju	ow rise	many dictio	y sepa	arato erato	e jail e?	facilit	ties	doe	s yo	ur	
	 Include all physically separate jail facilities with separate administrators and staff. Units at separate locations without BOTH of these characteristics should be reported with those units having the same administrator and staff. 											
	•	Inc are	lude e a pa	temport rt of y	orary our	hold comb	ing or ined ja	locl iil fu	cup fa unctio	aciliti on.	ies th	at
	•	Ex	clude NOT	temp part	orary of yo	holo our co	ling fac mbine	cilit d ja	ies ar ail fur	nd lo	ckup n.	s that
			Nur	nber (of jai	I facil	ities					
4.				Vlarci dictio			6, and —	I A _I	pril 1	, 20	09, c	loes
	a.		Open	1 or r	more	new	faciliti	es?	Plea	se lis	st nar	ne(s).
	b.		Close	1 or ı	nore	facili	ities? F	Plea	se lis	t naı	ne(s)	
	c.		No op this ti		gs or	closi	ngs are	e pl	anne	d du	ring	

5. On March 31, 2006, were any of your jail facilities under a State or Federal court order or consent decree to limit the number of inmates they can house?						
	01 🗌	Ye	s —			
		a.	What is the maximum number of inmates your jail jurisdiction is allowed to house?			
			Inmates			
		b.	In what year did this order or decree take effect?			
			 If more than one, report the year for the longest in effect. 			
			Year			
	02 🗌	No				
6.	unde cons conf	er a en ine	ch 31, 2006, were any of your jail facilities Federal, State or local court order or t decree for specific conditions of ment?			
	01 🗌					
			nat were the specific conditions? $ark(X)$ all conditions that apply.			
			Crowding			
			Recreation/exercise			
						
		07				
		08				
		09	Fire hazards			
			☐ Disciplinary procedures or policies			
		11	¬			
		1	or policies			
			Religious practices			
		13	☐ Search policies or practices☐ Education or training programs			
		15	Counseling programs			
		16	Inmate classification			
		17	☐ Other – <i>Specify</i>			
	_					
	02 🗌	No				

	Section II — STAFF	9.	On March 31, 2006, how many staff employed by your jail jurisdiction were —	
7.	On March 31, 2006, how many staff employed		a. White, not of Hispanic origin	
	 by your jail jurisdiction were — Exclude staff paid through contractual agreements and community volunteers. 		b. Black or African American, not of Hispanic origin	
	, Full-time Part-time		c. Hispanic or Latino	
	a. Payroll staff		d. American Indian or Alaska Native, not of Hispanic origin	
	b. Nonpayroll staffInclude staff on the		e. Asian, not of Hispanic origin	
	payroll of other government agencies (e.g., health department,		f. Native Hawaiian or Other Pacific Islander, not of Hispanic origin	
	school district, court) and unpaid interns.		g. Two or more races	
	Exclude community volunteers		h. Additional categories in your	
	c. Total staff (Sum of Items 7a and 7b)		information system — Specify _▼	
8.	On March 31, 2006, how many staff employed			_⊔
	by your jail jurisdiction were —		i. Not known	_ 🗆
	 Count each employee only once. Classify employees with multiple functions by the function performed most frequently. 		j. TOTAL (Sum of items 9a to 9i should equal item 7c)	
	INCLUDE only payroll and nonpayroll staff.EXCLUDE contract staff and community volunteers.	10.	Of all correctional officers reported in item 8b, how many were —	
	a. Administrators		a. White, not of Hispanic origin	🗆
	Sheriffs, chiefs of police,		b. Black or African American, not of Hispanic origin	
	administrators, Male Female department heads, and assistants		c. Hispanic or Latino	
	b. Correctional officers		d. American Indian or Alaska Native, not of Hispanic origin	_ 🗆
	 Deputies, monitors, and other custody staff 		e. Asian, not of Hispanic origin	П
	who spend more than 50% of their time with		f. Native Hawaiian or Other Pacific	
	the incarcerated population		Islander, not of Hispanic origin	
	c. Clerical and maintenance staff		g. Two or more races	_⊔
	Typists, secretaries, records clerks,		h. Additional categories in your information system — Specify	
	janitors, cooks, groundskeepers, etc.			
	d. Educational staff		i. Not known	
	Academic teachers, vocational teachers, etc		j. TOTAL (Sum of items 10a to 10i should equal item 8b)	
	e. Professional and technical staff	11.	Between April 1, 2005, and March 31, 2006, were there any inmate-inflicted physical or sexual assaults on facility staff?	
	 Counselors, classification officers, psychiatrists, psychologists, social workers, doctors, 		 Report any assaults that involved a weapon or ser injury requiring immediate medical attention more extensive than first aid. 	
	dentists, nurses, chaplains, etc		01 ☐ Yes — Number of assaults on staff	
	f. Other staff – Specify		02 🗆 No assaults on staff	
	g. TOTAL (Sum of	12.	Between April 1, 2005, and March 31, 2006, how many facility staff deaths resulted from assaults by inmates?	
	items 8a to 8f should equal sum of item 7c)		Staff deaths inflicted by inmate	S

	Section III — JAIL PROGRAMS	18. Which types of counseling or special programs are available to inmates in your jail facilities?	
13.	Section III — JAIL PROGRAMS On March 31, 2006, what types of work assignments were available to persons CONFINED in your jail facilities? EXCLUDE work release programs. Mark (▼) all that apply. Facility support services (e.g., office and administrative work, food service, building maintenance) Public works assignments (e.g., road, park, or public maintenance work) Farming/agriculture/forestry/fishing Correctional industries (e.g., wood products, textiles, manufacturing, services, etc.) Other – Specify ▼	are available to inmates in your jail facilities? Mark (X) all that apply.	
	06 ☐ None	10 🗀 NOTE	
14.	On March 31, 2006, how many persons CONFINED in your jail facilities had work assignments?	Section IV — COST OF INCARCERATION	
	EXCLUDE work release programs.	Report data for the fiscal year that ended between April 1, 2005, and March 31, 2006 —	
	Number of inmates with work assignments	19. What were the operating expenditures for this jail jurisdiction? Total annual	
15.	Do any of your jail facilities operate a work release program that allows CONFINED inmates to work in the community unsupervised by facility staff but return to the facility at night?	a. Total salaries and wages, amount including employer contributions to employee benefits (Estimate	
	01 ☐ Yes — How many inmates	employer contributions, if not available.)	
	were participating on March 31, 2006? □	b. Other operating expenditures,	
	02 □ No	such as the purchase of food, supplies, medical expenses, and utilities \$	
16.	What types of educational programs are available to inmates in your jail facilities?	20. What were the capital Total annual	
	 INCLUDE only formal programs offered to your jail inmates. 	expenditures for this jail amount jurisdiction? (Omit cents)	
	 EXCLUDE unscheduled activities and informal programs. 	a. Total construction costs for new buildings, major repairs, and improvements \$	
	EXCLUDE programs for persons under your jail supervision but who were not confined.	b. Equipment, furnishings, vehicles, installations, etc \$	
	Mark (X) all that apply.	• Other (such as nurchase of land	
	on Lower basic adult education (ABE) 1st to 4th grade level	rights-of-way, title searches, etc.) . \$	
	02 Upper basic adult education (ABE) 5th to 8th grade level	21. Is a per diem fee paid by other authorities for persons held in your facilities? — Mark (X) one	e.
	 O3 ☐ Secondary education (GED) O4 ☐ Special education (e.g., programs for inmates 	01 ☐ Yes — What is the daily amount paid by Federal, State, and other local	
	with learning disabilities) 05 Occupational/vocational education (e.g., auto	authorities for each inmate held?	
	repair, construction trades, computer repair) 66 English as a second language (ESL)	Federal \$	
	06 ☐ English as a second ranguage (E3E) 07 ☐ College courses	State \$	
	08 Study release programs		
	09 None	Local \$	
17.	On March 31, 2006, how many persons CONFINED in your jail facilities were enrolled in educational programs?	for other authorities.	
	Number of persons enrolled	03 ☐ No — Inmates are not held for other jurisdictions.	