



## ***Wardens Peer Interaction Program***

The Correctional Management Institute of Texas (CMIT) would like to thank you for your interest in participating in the ***Wardens Peer Interaction Program***. This program is hosted by CMIT and the North American Association of Wardens & Superintendents (NAAWS). The next program will be held October 6-8, 2020, virtually, for the first time ever.

This program is designed for Wardens and Superintendents, including Deputy and/or Assistant Wardens and Superintendents. It provides an excellent opportunity for participants to interact with their peers to discuss current management and direction for prison/jail operations and programs, as well as time to explore best practices and prepare strategies for handling critical correctional challenges. To aide in the facilitation of the program, participants will be asked to present a topic of critical concern or best practice within their agency or facility. Each presentation will be followed by a discussion period for all attendees to actively participate in.

We ask that selected participants schedule to be available via zoom from 10:00 am - 12:00 pm Central on Tuesday, October 6, 2020 for introductions. Presentations and follow up discussions will take place Wednesday and Thursday, October 7 and 8, 2020 from 10:00 am - 2:30 pm Central.

Participants will be asked to prepare a 15 to 20-minute presentation (in conjunction with another attendee from the same agency, if applicable) to present to the group for discussion.

Only 30 participants will be accepted and agencies are encouraged to send participants in teams of two. **Selected participants will be contacted by our office and provided with additional logistical and program information.** Please complete the below application, in its entirety, and submit it to:

**Ashley Koonce, Project Coordinator**  
[koonce@shsu.edu](mailto:koonce@shsu.edu)  
Correctional Management Institute of Texas  
George J. Beto Criminal Justice Center  
P.O. Box 2296  
Huntsville, TX 77340  
Phone: 936-294-1706 Fax: 936-294-1671



Name \_\_\_\_\_ Agency \_\_\_\_\_  
Last, First MI.

Facility \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

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### Professional Experience

Date(s)

Brief Description of Duties

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### Educational Experience

Date(s)

Institution

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**Current Unit/Facility Overview**

<b>Year Established</b>	<b>Unit Acreage</b>	<b>Level(s) of Security</b>	<b>Facility Capacity</b>	<b>Number of Beds</b>	<b>Inmate Population</b>
<b>Number of Officers</b>	<b>Number of Employee</b>	<b>Average Inmate Stay</b>	<b>Average Inmate Age</b>	<b>Unit Budge</b>	<b>Overall Prison F/Y Budget</b>

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**Work Programs**

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**Educational Programs**

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**Other**