Ohio Department of Rehabilitation and Correction

Authority for Release of Information

Last Name:	First Name:	Middle Name:	Maiden/Alias Name:	Last Four (4) Digits of SSN:

Street Address:	City:	County:	State:	Zip Code:

Driver's License No.:	State of Issue.:	Place of Birth (county or city, state, country):

Sex:	Race:	State of Ohio User ID Number: (If applicable)	Date of Birth (m/d/y):

I, authorize a review and full disclosure of all records, or any part thereof, concerning myself, by and to **any** duly authorized agent of the Ohio Department of Rehabilitation and Correction, whether the said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of all educational institutions, courts, police agencies, present and previous employment to include pre-employment records, background reports, efficiency ratings, discipline records, termination records, complaints or grievances filed by or against me, and salary records.

The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation which may provide pertinent data for the Ohio Department of Rehabilitation and Correction to consider in determining my suitability for worksite entry to provide contracted services, volunteer services, or for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for worksite entry to provide contracted services, volunteer services, or for employment by the Ohio Department of Rehabilitation and Correction. I understand that all materials pertaining to this background investigation become the property of the Ohio Department of Rehabilitation and Correction and will not be returned to me.

I hereby give permission and waive all provisions of company policy and law forbidding any school, court, police agency, employer, firm or person, from disclosing any knowledge or information they have concerning me. I agree to indemnify and hold harmless the person to whom this request is presented and his or her agents and employees, for and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. (see ORC 4113.71, Employer immunity as to job performance information disclosures, on the reverse of this form.) I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

Signature:	Date:

§ 4113.71

Employer immunity as to job performance information disclosures.

(A) As used in this section:

(1) “Employee” means an individual currently or formerly employed by an employer.

(2) “Employer” means the state, any political subdivision of the state, any person employing one or more individuals in this state, and any person directly or indirectly acting in the interest of the state, political subdivision, or such person.

(3) “Political subdivision” and “state” have the same meanings as in section 2744.01 of the Revised Code.

(B) An employer who is requested by an employee or a prospective employer of an employee to disclose to a prospective employer of that employee information pertaining to the job performance of that employee for the employer and who discloses the requested information to the prospective employer is not liable in damages in a civil action to that employee, the prospective employer, or any other employer is not liable in damages in a civil action to that employee, the prospective employer, or any other person for any harm sustained as approximate result of making the disclosure or of any information disclosed, unless the plaintiff in a civil action establishes, either or both of the following:

(1) By a preponderance of the evidence that the employer disclosed particular information with the knowledge that it was false, with the deliberate intent to mislead the prospective employer or another person, in bad faith, or with malicious purpose;

(2) By a preponderance of the evidence that the disclosure of particular information by the employer constitutes an unlawful discriminatory practice described in section 4112.02, 4112.021 [4112.02.1], or [4112.02.2] of the Revised Code.

(C) If the court finds that the verdict of the jury was in favor of the defendant, the court shall determine whether the lawsuit brought under division (B) of this section constituted frivolous conduct as defined in division (A) of section 2323.51 of the Revised Code. If the court finds by a preponderance of the evidence that the lawsuit constituted frivolous conduct, it may order the plaintiff to pay reasonable attorney’s fees and court costs of the defendant.

(D)(1) This section does not create a new cause of action or substantive legal right against an employer.

(2) This section does not affect any immunities from civil liability or defenses established by another section of the Revised Code or available at common law to which an employer may be entitled under circumstances not covered by this section.

HISTORY: 146 v H 44. Eff 7-3-96.

The provisions of § 2 of HB 44 (146 v --) read as follows:

SECTION 2. Section 4113.71 of the Revised Code, as enacted by this act, shall apply only to cause of action against employers, as defined in the section, for harm that allegedly arises from the disclosure of job performance information pertaining to an employee, as defined in that section, which occurs on or after the effective date of this act. With respect to causes of action against employers for harm that allegedly arose from a disclosure of job performance information pertaining to an employee prior to the effective date of this act, the liability or immunity from liability of an employer and the defenses available to an employer shall be determined as if section 4113.71 of the Revised Code has not been enacted.

Staff Nexus

Definition of Staff Nexus - An employee, volunteer or contractor who has any contact and/or relationship with an inmate or offender who is currently under supervision of DRC.

***Notice**: If the relationship changes you are required to complete a new nexus form immediately.*

Name _____ Job Title _____

Your OAKS Number: _____

Your Current Work Location: _____

COMPLETE ONLY ONE SECTION BELOW (I, II OR III)

I ☐ NO NEXUS

I state that, to the best of my knowledge, I have no nexus connection, affiliation, or relationship to any inmate/offender currently under the supervision of the the Ohio Department of Rehabilitation and Correction. I understand that should I become aware of such a relationship I am required to notify my Managing Officer/APA Regional Administrator the next business day.

II ☐ NEXUS - REQUESTING NO CONTACT *(Select one of the 2 options below and explain below)*

I do have a nexus I am required to report, but I do not wish to correspond, visit, send funds/packages or communicate with them while they are incarcerated or on under community supervision.

Offender Name: _____

Offender Number: _____

☐ I do not anticipate professional conflict if the individual remains in the same prison/APA region.

☐ I anticipate a professional conflict if the individual remains in the same prison/APA region

Please Note: In some cases, inmates with certain medical, mental health, classification, security, supervision or other needs will required the inmate to be kept in a certain prison/region. In situations where inmates cannot be moved for these reasons, requests to not work in the same facility/region with the inmate cannot be accommodated.

Please describe your relationship and the reason you anticipate a professional conflict:

III ☐ NEXUS - REQUESTING CONTACT

I have a nexus with the inmate/offender listed below who is currently incarcerated in the ODRC or under the supervision of the APA and I wish to maintain contact with them.

Offender Name: _____

Offender Number: _____

Please describe your relationship and the purpose and extent of the contact:

Staff	

Print Name:	Signature:	Date:

Managing Officer Action:

☐ Approve No Contact - Transfer ☐ Approve Contact

☐ Approve Professional Contact Only - No Transfer ☐ Disapprove Contact

Print Name:	Signature:	Date:

Ohio Department of Rehabilitation and Correction

Contractor/Volunteer/Intern Supplemental Questionnaire

Applicant Name: _____ Last Four (4) Digits of Social Security No.: _____

1. Have you ever been convicted of O.R.C. 2909.22, 2909.24, and/or 2909.29; Soliciting or providing support for an act of terrorism, Terrorism, or money laundering in support of terrorism?
   ☐ Yes ☐ No
2. Have you ever been accused of an inappropriate or unauthorized relationship in a prison, jail, lockup, community confinement facility, juvenile facility or other institution?
   ☐ Yes ☐ No
3. If you answered yes to the above question, please indicate the Employer, Dates of employment, Allegation, and Outcome. If no, write N/A.
4. Have you ever been accused of sexual abuse or resigned from employment during a pending investigation of an allegation of sexual abuse?
   ☐ Yes ☐ No
5. If you answered yes to the above question please indicate the Employer, Dates of employment, Allegation, and Outcome. If no, write N/A.
6. Have you ever been accused of sexual harassment?
   ☐ Yes ☐ No
7. If you answered yes to the above question please indicate the Employer, Dates of employment, Allegation, and Outcome. If no, write N/A.
8. Have you ever been civilly or administratively adjudicated or convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?
   ☐ Yes ☐ No
9. If you answered yes to the above question please indicate the Location of adjudication or conviction, Date of adjudication and/or conviction, Allegation, and Outcome. If no, write N/A.
10. Have you ever been accused of or been convicted of O.R.C. 2921.36; Illegal conveyance of weapons, drugs, or other prohibited items onto the grounds of a detention facility or institution?
    ☐ Yes ☐ No
11. If you answered yes to the above question please indicate the Employer, Date of employment, Allegation and Outcome. If no, write N/A.
12. Have you ever knowingly accessed confidential personal information in violation of a rule of a state agency; or knowingly used or disclosed confidential personal information in a manner prohibited by law?
    ☐ Yes ☐ No
13. If you answered yes to the above question please indicate the Employer and/or location, Location, Date, and Outcome. If no, write N/A.

Applicant Signature:	Date:

Each question must be answered

Volunteer Individual Acknowledgment

I, _____ , hereby acknowledge that I have received
(Print Name)
and have read the Standards of Conduct for the Ohio Department of Rehabilitation and Correction and reviewed the Volunteer Orientation Manual. I understand that the Standards of Conduct and Orientation Manual requirements will remain in effect during my volunteer service period.

Signature:	Date:

DRC 3286 (Rev. 12/99) ACA 4112, 4116, 4117

Volunteer Program Acknowledgment

I_____, hereby consent to provide voluntary services to the Ohio Department of Rehabilitation and Correction (ODRC).

I understand that I must report at the time(s) agreed upon by myself and the Volunteer Coordinator. I will notify the department in advance whenever I am unable to report as assigned. I understand that I am expected to maintain a professional image at all times while performing volunteer duties. I agree to be cooperative, courteous, reliable and obey all ODRC rules and regulations. I understand that my participation does not guarantee future employment with ODRC.

I understand that as a participant in the ODRC Volunteer Program, I am not an ODRC employee and I am not entitled to any compensation, employment benefits or ODRC legal representation. I understand that I am not covered by worker's compensation, unemployment compensation, retirement or leave accrual. I will not be reimbursed for mileage, parking, meals or any other expenses.

I understand that I will not be permitted to perform any activity involving the actual receipt or handling of money (either cash or readily negotiable documents such as checks, money orders, state warrants, and the like) while performing my volunteer services for ODRC. I shall refrain from engaging in any such activity. I understand that I am not an agent of ODRC and I will not make any commitment on behalf of ODRC to third parties.

I also understand that there are inherent risks that I may encounter during the time of my participation in the Volunteer Program due to the nature of the agency's mission. I understand and promise that I will indemnify and hold harmless ODRC for any loss, harm or damage experienced by ODRC and its employees or any third parties that may be caused by an act of mine, or my failure to act in the performance of my volunteer services for ODRC.

I understand and hereby state that I fully agree to maintain the confidentiality of all records and information, both written and verbal, which pertain to offenders within ODRC. I understand and agree that I will not:

1) accept gifts from offenders
2) conduct business transactions with offenders or their families
3) participate in the handling of the personal funds of offenders
4) collect or distribute restitution owed by offenders
5) give legal advice to offenders
6) give public statements about offenders under the jurisdictions of ODRC

I understand that I must conform to the rules and regulations of ODRC to the best of my ability. Failure to comply with the rules and procedures of this program will be cause for forfeiture of any future access to or participation in this program. I understand that my service as a volunteer can be terminated at any time by ODRC.

I understand that this document is not a contract, either express or implied, but simply constitutes an acknowledgement of my understanding of the nature of my services to ODRC. If I am representing an agency, I am authorized to enter into such an agreement.

Volunteer Signature:	Date:
Service Provided:	Period of Service (beginning mo/day to mo/day):
DRC Program Coordinator:	Date:
Volunteer Coordinator:	Date:

Ohio Department of Rehabilitation and Correction

Individual Application for Volunteer/Intern Services

		Date Application Submitted:		
Last Name:	First Name:	MI:	Date of Birth:	Last 4 Digits of Driver's License #:
Other names you have used or been known by:				
Current Residence:		Apt #:	Area Code/Phone Number:	
City:		State:		Zip Code:
E-mail Address:		Occupation:		

Please list all former residences during the last (5) years *(list nothing prior to your 15th birthday).*

Address of Residence	City, State & Zip Code	Dates	

Please list three (3) personal and/or professional references that are knowledgeable of you.

Name	Home & Work Area Code/Phone Numbers	Relationship

EMERGENCY CONTACT - In case of emergency, please contact:

Name:	Area Code/Phone Number:

Name of Organization sponsoring you as a volunteer/intern with our agency. If not applicable, please indicate N/A.
Address of Organization (including City, State & Zip):

Site/Facility Location you prefer to volunteer/intern:	Address:

For purposes of data gathering we would appreciate you checking the following as it applies to you:

Gender	Race	Education
☐ Male ☐ Female	☐ White ☐ Black ☐ Hispanic ☐ Native American or Alaskan Native ☐ Asian/Pacific Islanders	☐ Less than High School ☐ High School Graduate ☐ GED ☐ Some College
Age	☐ Other: _____	☐ College Degree: _____

BACKGROUND INFORMATION

Have you ever been employed by the Department of Rehabilitation and Correction? ☐ Yes ☐ No

If YES, please list dates of service, position(s) held and location(s):

Have you ever been a temporary employee, volunteer or intern for the Department of Rehabilitation and Correction? ☐ Yes ☐ No

If YES, please list dates of service, location(s) and supervisor(s):

Have you ever been dismissed from any organization as a volunteer/intern? ☐ Yes ☐ No

If YES, please list date, location and explain why:

CRIMINAL HISTORY

Have you ever been convicted of a criminal offense? ☐ Yes ☐ No If yes, what State: AL

If YES, list offense(s): ☐ Misdemeanor ☐ Felony

Location of Conviction:	Date of Conviction:

Have you ever been incarcerated? ☐ Yes ☐ No

If YES, list date(s) of incarceration:	If YES, list previous Offender Number(s):

Are you currently on probation with any city, county or state law enforcement agency? If YES, please list the following: ☐ Yes ☐ No

Conviction	Agency	Date of Conviction	Conviction Location (City & State)	Length of Probation

Are you related to or associated with any offender presently incarcerated or under the supervision of the Ohio Department of Rehabilitation and Correction? ☐ Yes ☐ No

If YES, list offender name(s):	If YES, have you notified Institution by completing DRC Form 1500 - Nexus? ☐ Yes ☐ No

Have you ever been a victim of crime? ☐ Yes ☐ No

If YES, is the offender currently confined or under supervision of the Ohio Department of Rehabilitation and Correction? ☐ Yes ☐ No ☐ Unknown

If YES, please list offender's name and location:

Declaration of Understanding

The Ohio Department of Rehabilitation and Correction has a zero tolerance for the conveyance of drugs, alcohol, and weapons into its correctional institutions or community facilities. Any such act will constitute a violation of section 2921.36 of the Ohio Revised Code which states in part that "No person shall knowingly convey, or attempt to convey, onto the grounds of a detention facility or of an institution that is under the control of the department of mental health or the department of mental retardation and developmental disabilities any of the following items:

(1) Any deadly weapon or dangerous ordnance, or any part of or ammunition for use in such deadly weapon or dangerous ordnance;

(2) Any drug of abuse, as defined in section 3719.011 of the Revised Code;

(3) Any intoxicating liquor, as defined in section 4301.01 of the Revised Code;

(4) Cash, in excess of $10.00 (ten dollars);

(5) Cellular telephone, two-way radio, or other electronic communications device;

(6) Any product that contains tobacco including but not be limited to cigarettes, loose tobacco, cigar, snuff, chewing tobacco, or any other preparation of tobacco, tobacco substitutes, smoking paraphernalia (i.e., matches, lighter, cigarette papers, and rolling machine).

Every effort will be made to prosecute to the fullest extent of the law any person found to be in violation of this section of the Ohio Revised Code.

I have read or it has been read to me, and I understand the above declaration. I will not bring any weapon, ammunition, drug or alcohol into the prison or community facility operated by the Department of Rehabilitation and Correction.

I understand that I may be subject to a LEADS and or Driver's License check to be conducted by the Ohio Department of Rehabilitation and Correction, per DRC Policy 34-PRO-07.

By signing below, the applicant agrees to abide by all agency policies, particularly those relating to confidentiality of information and security practices.

Falsification will result in disapproval of this application and/or removal from the program.

Name (Print):	
Signature:	Date:
Witness:	Date:

Program Coordinator:	Date:

Comments:

Volunteer/Intern Coordinator:	Date:

Comments:

LEADS Criminal Check completed: ☐ Yes ☐ No

Warden / DPCS Designee:	Date:

Comments:

Ohio Department of Rehabilitation and Correction

Volunteer Regions

NW Region

- ☐ Allen Oakwood Correctional Institution - Lima, Ohio
- ☐ Dayton Adult Parole Authority Dayton, Ohio
- ☐ Dayton Correctional Institution - Dayton, Ohio
- ☐ Lima Adult Parole Authority Lima, Ohio
- ☐ Marion Correctional Institution - Marion, Ohio
- ☐ Mansfield Correctional Institution - Mansfield, Ohio
- ☐ North Central Correctional Institution - Marion, Ohio
- ☐ Ohio Reformatory for Women - Marysville, Ohio
- ☐ Richland Correctional Institution - Mansfield, Ohio
- ☐ Toledo Correctional Institution - Toledo, Ohio

NE Region

- ☐ Akron Adult Parole Authority Akron, Ohio
- ☐ Cleveland Adult Parole Authority Cleveland, Ohio
- ☐ Grafton Correctional Institution - Grafton, Ohio
- ☐ Lake Erie Correctional Institution - Conneaut, Ohio
- ☐ Lorain Correctional Institution - Grafton, Ohio
- ☐ Northeast Reintegration Center - Cleveland, Ohio
- ☐ Ohio State Penitentiary - Youngstown, Ohio
- ☐ Trumbull Correctional Institution - Leavittsburg, Ohio

SW Region

- ☐ Cincinnati Adult Parole Authority Cincinnati, Ohio
- ☐ Chillicothe Correctional Institution - Chillicothe, Ohio
- ☐ Lebanon Correctional Institution - Lebanon, Ohio
- ☐ London Correctional Institution - London, Ohio
- ☐ Madison Correctional Institution - London, Ohio
- ☐ Ross Correctional Institution - Chillicothe, Ohio
- ☐ Warren Correctional Institution - Lebanon, Ohio

SE Region

- ☐ Belmont Correctional Institution - St. Clairsville, Ohio
- ☐ Correctional Reception Center - Orient, Ohio
- ☐ Columbus Adult Parole Authority Columbus, Ohio
- ☐ Franklin Medical Center - Columbus, Ohio
- ☐ Noble Correctional Institution - Caldwell, Ohio
- ☐ Pickaway Correctional Institution - Orient, Ohio
- ☐ Southeastern Correctional Complex - Lancaster, Ohio
- ☐ Southern Ohio Correctional Facility - Lucasville, Ohio

Category of Volunteer Service *(check all that apply)*

- ☐ **Spiritual:** Religious study & group worship
- ☐ **Education:** Academic Tutor, Literacy, Health & Nutrition
- ☐ **Substance Abuse Recovery**
  - ☐ Alcoholics Anonymous ☐ Narcotics Anonymous
- ☐ **Occupational:** Workforce Guidance & Readiness
- ☐ **Professional-Technical Skill:** *please specify*

_____

(if applying for position requiring license or certificate, attach current document photocopy & liability rider)

- ☐ **Recreation:** Fitness/Crafts/Arts/Hobbies/Sports
- ☐ **Social Dynamics:** Cultural Awareness, Diversity, Parenting, Communication Skills, Strengthening Marriage, Motivational Speakers
- ☐ **Support:** Advisory Board, Family Service, Victim Service, Life Coach
- ☐ **Aftercare:** Mentoring, Re-entry support
- ☐ **Other:** *please specify*

Release of Liability

In consideration of the opportunity afforded me to participate as a volunteer, operating under the auspices of the Ohio Department of Rehabilitation and Correction, and in further consideration of receiving permission to participate as such, the receipt of such permission being also hereby acknowledged, and in recognition of the possible danger to which I may voluntarily subject myself in the course of such participation, I _____, hereby knowingly, freely and voluntarily waive any right or cause of action of any kind whatsoever, arising as a result of such activity from which any liability may or could accrue to the Department of Rehabilitation and Correction. Further, I hereby agree not to release and/or share with any individual confidential information to which I may be granted access during the course of such participation.

In signing the foregoing release, the undersigned hereby acknowledges and represents:

a) That (s)he has read the foregoing release, understands it, and signs it voluntarily;
b) That (s)he is not an agent or employee of the Ohio Department of Rehabilitation and Correction and
c) That (s)he is authorized to sign for the agency providing the volunteer service.

Volunteer Signature:	Date:
Witness:	Date:
Title:	

Standards of Conduct for Contractors, Volunteers and Interns

Definitions

Contractor - Any individual or business under legal agreement with the Ohio Department of Rehabilitation and Correction (ODRC) to provide goods, services or construction for a certain price.

Volunteer - Any individual who has been recruited and has requested volunteer status. The person will be involved in on-going programs and will have direct contact with offenders and offenders under supervision. Paid or unpaid student interns shall be considered as volunteers.

Intern - A paid or unpaid individual in an educational or experiential capacity whose institution or department assignment will deliver a work product of material benefit to the individual and DRC.

Purpose

The purpose of this document is to provide guidance to contractors, volunteers and interns entering the facilities of the ODRC or working with offenders under supervision. In view of the nature and purpose of the various facilities of ODRC it is necessary that all persons who enter the facilities or work with offenders under supervision in the community, understand the rules and security requirements of a correctional environment. Persons entering a correctional facility or who provide services to offenders under supervision, have certain obligations under law to insure that their actions do not jeopardize the safe and secure operation of ODRC.

Responsibilities

The Site Manager (APA Regional Administrative/Designee, appropriate Section Manager, or Warden) of each facility/region has the responsibility to ensure that all contractors, volunteers and interns understand the guidelines necessary for their safe entrance and operation while in a correctional setting. Staff will be assigned by the Site Manager to ensure that all such persons are properly oriented to working in a correctional environment. Contractors, volunteers and interns must realize their responsibility to follow the rules of conduct, ethics, policies, and law relating to their assignments. The Site Manager will approve entrance and training of all contractors, volunteers and interns and has the authority to terminate entrance authorization or working relationships for any such person who has demonstrated an inability to follow the approved guidelines. In addition, violations may result in termination of contracts/services and/ or prosecution.

Personal Conduct

It is essential to the orderly operation of a correctional department that all persons conduct themselves in a professional manner. The following are several types of behavior that will not

be tolerated within a correctional environment, including APA offices. (This is not intended to be an all-inclusive list).

1. The use, possession, conveyance, or unauthorized distribution of illegal drugs, narcotics, or controlled substances is strictly prohibited at any time. Use of alcoholic beverages or being under the influence of alcohol or drugs while on duty or conducting volunteer work is prohibited.

2. No person shall, without authorization from the Site Manager, allow themselves to show partiality toward, or become emotionally, physically, or financially involved with offenders, parolees, probationers, transitional controlees or their families, or establish a pattern of social fraternization with same.

   A. No persons shall offer, send or give to an offender, parolee, probationer, transitional controlee, or a member of his/her family, or to any person known to be associated with him/her, any article, monies, favor, or service which is not authorized in the performance of the person's duties and which conflicts or appears to conflict with the person's assigned duties. Contractors/volunteers or interns shall not accept any gift, personal service, or favor from an offender, parolee, probationer, or transitional controlee, or his/her family, or person known to be associated with him/her which is not authorized in the performance of the person's duties and which conflicts, or appears to conflict, with the person's duties.

   B. Contractors shall not visit an offender, parolee, probationer, or transitional controlee while such an individual is under the supervision of the Department unless such a visit is given prior authorization during the contract service period by the ODRC Contact Person and Site Manager of the respective facility or the visit is part of the job duties.

   C. Volunteers/Interns shall not visit an offender at the institution or DPCS office that they are volunteering at except as referenced by DRC policy 71-SOC-01. Volunteers must notify their staff supervisor and complete DRC form 1500, Staff Nexus, if/when they choose to visit an offender at another prison.

   D. Contractors who become involved in any set of circumstances as described above, have an affirmative responsibility of notifying their contact person at the correctional institution who will be responsible for notifying the site manager.

3. No such person shall, without the express authorization of the Site Manager, show favoritism or give preferential treatment to an individual under supervision of the ODRC to include, but not limited to offering, receiving, or giving of a favor or anything of value.

4. Brutality, physical violence, or intimidation of inmates, and/or their families, such persons will not be permitted, nor will force be used beyond that necessary to protect any person from physical harm.

5. The use of obscene, threatening, or abusive language by contractors/volunteers toward offenders or others will not be tolerated.

Work Schedule

Due to staffing and security concerns and the nature of services being performed by contractors, volunteers and interns, it is essential that contractors, volunteers and interns work out a mutually acceptable work schedule with their ODRC Contact Person or Intern Mentor. Failure to perform services consistent with the mutually agreed upon schedule may be considered failure to fulfill the requirements of the contract, volunteer service or internship program.

Responsiveness

1. Inattentiveness to job responsibilities and procedures in a correctional environment can result in escapes, assaults, and other incidents. Therefore, contractors, volunteers and interns must remain fully alert and attentive during the time they are on state property or in a state operated office.

2. To ensure safety and security to the facility and DPCS operations, such persons must abide the instructions of their ODRC Contact Person or Intern Mentor regarding safety and security related issues.

Confidentiality

1. Some contractors/volunteers may have access to official information, ranging from personal data concerning staff and inmates to information involving security. Because of the various degrees of sensitivity afforded to this information, official information may be disclosed or released only as required in the performance of any contractor's/ volunteer's duties upon specific authorization from someone with the delegated authority to release official information. The Director or his designee in the Operation Support Center and the Site Managers are the only persons authorized to release official information.
2. The above shall not be construed as a reason to deny authorized persons access to official records and files. ODRC has an obligation to supply official information in response to requests from organizations or individuals upon determining that such individuals are properly identified and acting in an official capacity. To ensure the proper use of official information the following rules of conduct are established:

    A. Contractors/volunteers will verify the identification and authority of individuals requesting access to information prior to giving or discussing records, personnel files, or other official information.

    B. Authorized persons will not be denied access to official information.

    C. Contractors/volunteers will not use, or release for use, official information for private purposes unless this information is available to the general public.

    D. Contractors/volunteers will not remove from files, or make copies of records or documents except in accordance with established procedures or upon proper authorization.

E. Contractors/volunteers will not make statements or release official information that could breach the security of the institution/APA district office or unduly endanger any person.

F. Former contractors/volunteers will be granted access only to information available to other members of the general public, and will have no greater standing than members of the public, irrespective of their past contractual relationship and/or any associations developed in the course of such relationships.

Illegal Activity

The very nature and purpose of the Department's existence demand that it closely monitors any alleged illegal activity by its employees and non-employees. Should any contractors, volunteers or interns be arrested for, charged with or convicted of any felony or degree misdemeanor (except for a minor misdemeanor), or is required to be a plaintiff in any court in a criminal matter, that person shall immediately inform his/her ODRC Contact Person or Intern Mentor. Such information shall be evaluated and may be reason to terminate the contract/service/ internship immediately.

Conveying or Trafficking in Contraband

The introduction of contraband into or upon the grounds of any state property, or taking or attempting to take contraband there from, or otherwise trafficking in contraband without the knowledge and consent of the Site Manager of such institution/regional office is prohibited. Contraband is defined as "any" article which is intended for the unauthorized use or possession of any inmate or which is prohibited by law or Department Policy from being carried onto the grounds of an institution, detention facility or APA Office. Examples of contraband, which could be intended for an inmate's/offender's unauthorized possession or use, include letters, stamps, tools, paper, food, messages, and money. Examples of contraband, which are prohibited by law (ORC Section 2921.36), include firearms, knives, explosives, ammunition, drugs, and alcoholic beverages.

Investigations

Every contractor/volunteer/intern is required to immediately report to the Site Manager, or designee, any violation or attempted violation of any law or regulation, and any act or omission by any person which has resulted in a breach of institution security or jeopardizes the safety of others.

Allegations of misconduct will be investigated by the Appointing Authority or his designee (could be immediate supervisor or anyone else in the chain of command). Where appropriate, investigations will be coordinated and conducted by the Department Chief Inspector and/or other appropriate agency. The Ohio State Highway Patrol is responsible for investigating violations of Ohio laws occurring on state property.

During the course of an official investigation, contractors, volunteers and interns are to cooperate fully by providing all pertinent information that they may have. Failure to answer any inquiry fully and to the best of his/her knowledge may be grounds to terminate the contract or internship.

Government Property

1. All government property, including automobiles, identification badges, supplies, equipment, telephones, and facilities are to be used for official purposes only. Loss, misplacement, theft, damage, or destruction of government property issued to and used by contractors, volunteers and interns must be reported to his/her ODRC Contact Person or Intern Mentor immediately.

2. ODRC credentials, identification cards, or badges shall not be used to coerce, intimidate, or deceive others or to obtain any privilege or article not otherwise authorized in the performance of official duties.

Chain of Command

Every contractor/volunteer will be assigned an ODRC Contact Person, or Intern Mentor who will be responsible for informing each person of the rules, policies, and regulations relevant to their work at the institution. In their absence, the contact person shall be the Shift Supervisor, generally know as the Shift Captain or Acting Shift Captain or the previously designated APA staff. In cases of emergency, this person will always be available to respond to questions or needs.

Standards of Conduct

Violation of the Standards of Conduct may result in termination of authorization to enter the grounds of the facility or APA Office Site, referral to the Ohio State Highway Patrol for criminal investigation, referral to the Appointing Authority for investigation, and/or termination of an existing contract with the institution or APA. The following acts are prohibited and considered violations of appropriate conduct:

1. Visiting an offender unless the person is a verified immediate family member and/or have been approved by the Warden of the institution per DRC Policy 71-SOC-01 and DRC Policy 76-VIS-01.

2. Deliberate destruction, damage, and/or theft of state property, offender property, property of visitors, or property of an employee, including state vehicles.

3. Failure to carry out directions provided by the ODRC Contact Person.

4. Commission of a felony or misdemeanor.

5. Interfering with the orderly operation of the institution.

6. Willfully making false, abusive, or obscene statements towards employees, inmates/ offenders, or the general public is prohibited.

7. Any acts of discrimination or harassment on the basis of sex, race, color, age, religion, national origin, disability or sexual orientation.

8. Theft.

9. Misusing official position for personal gain, including soliciting bribes, in the course of carrying out assigned duties at the institution, APA District Office or Operation Support Center.
10. Failure to report accidents or unsafe work conditions.
11. Threatening, intimidating, or coercing another for personal gain or satisfaction.
12. Fighting with a fellow worker, employee, visitor, or inmate/offender.
13. Interfering or failing to permit an official search, including searches of your person and of your personal property, or failing to cooperate with any official inquiry or investigation.
14. Distribution, possession, misuse, conveyance, or display of weapons, explosives, money, or other contraband.
15. Loss of control of any instrument that could result in a breach of security and/or jeopardize the safety of others, e.g., to include but not limited to, Class A tools, keys, communication devices, identification badges, etc.
16. Possession or consumption of alcoholic beverages or illegal drugs while on state property.
17. Reporting to the institution, APA office or place where, as the contractor, volunteer, or intern, you are performing official duties, under the influence of intoxicants, alcohol, or illegal drugs.
18. The posting or removal of any matter on a bulletin board without permission.
19. Other actions that could harm or potentially harm others.
20. Use of excessive force or physical abuse towards an inmate/offender.
21. Threatening or intimidating an inmate/offender.
22. Giving preferential treatment to an inmate/offender, the offering, receiving, or giving of a favor or anything of value to an offender without authorization from ODRC.
23. Engaging in unauthorized personal relationships with inmates or their families, including correspondence or phone communications with inmates and their families.

Entry Procedures

Institution Entry:

The ODRC Contact Person, Intern Mentor will coordinate the initial on-site visit. It is the responsibility of this person to ensure that contractors, volunteers and interns are aware of the rules and regulations governing activities in the institution. A designated administrative staff member must authorize entrance into the facility. Any person entering a correctional environment is subject to search at any time. This search may include a metal detector search, a frisk search, or a strip search. Failure to comply with any authorized search will result in removal

from the institution and possible denial of future entry.

All contractors, volunteers and interns must show identification to enter. Generally, a driver's license or state picture identification is appropriate for this identification process. contractors, volunteers and interns will be issued either a temporary badge or a temporary picture identification badge, which must be turned in at the conclusion of services each day. Such identifications are government property and may only be used at the institution/APA District Office/Central Office for identification purposes. They must be worn at all times and must not be left unattended.

Contractors, volunteers and interns must sign in and out upon entry and exiting state property. Appropriate attire for men includes a shirt and slacks. Women may wear a dress or pants, and a blouse or sweater. Shoes are required. Shorts, short skirts, see-through blouses, men's sleeveless shirts, and clothing with vulgar symbols or statements are examples of items of clothing are not permitted.

It is recommended that only items necessary for the volunteer/contracted service or internship be brought into the correctional environment. Large sums of money, pocket knives, etc., are not permitted. The contractor/volunteer will be asked to store the items either in their car or available lockers in the entrance area. If a contractor/volunteer requires medication they should take only that amount that is necessary for the day. All persons must sign the medication log if they require a dosage during their stay. This log will identify the type of medication and the amount. The institution cannot be responsible for loss of property. If a tradesman requires tools to perform their contracted service, all tools must be inventoried and a copy supplied to the Major. The Major may wish to review institution tool control policy and discuss security of equipment. A written authorization for all tools from the Deputy Warden of Operations or Major will be required before they are authorized to enter the institution.

The contractor/volunteer service or internship may or may not require contact with inmates/ offenders. Contractors, volunteers and interns are prohibited from developing any relationship with inmates outside of contractor, volunteer or internship activity. They cannot mail letters or make telephone calls to the inmate/offender for them. If a contractor/volunteer/intern receives mail or telephone calls from inmates or their families, they must report this to their ODRC Contact Person or the Deputy Warden, or APA Administrative Assistant. A contractor/ volunteer/intern should never disclose personal information such as their address, telephone number, or any personal information about their family or friends. There is no instance where sharing such information will serve a useful purpose.

DPCS Office Entry:

Entrance procedures will be explained during the orientation process to each DPCS Volunteer or Contractor that must report to a regional office.

If at any time a contractor/volunteer has a question, they should contact their ODRC Contact Person, Intern Mentor, DPCS Administrative Assistant, the Shift Captain, or the Deputy Warden of Operations.

I have read and understand the Standards of Conduct for Contractors/Volunteers/Interns, including the rules and guidelines listed above. I understand that entering a correctional institution, APA Office, or the Operation Support Center carries responsibilities necessary to ensure safety and security to the facility and will abide by all rules and guidelines contained herein.

Acknowledgement of Receipt of the Standards of Conduct for Contractors, Volunteers and Interns

I have read and understand the Standards of Conduct for Contractors, Volunteers and Interns including the rules and guidelines listed above. I understand that entering a correctional institution. DPCS District Office, or Central Office carries responsibilities necessary to ensure safety and security to the facility and will abide by all rules and guidelines contained herein.

Signature of Contractor/Volunteer/Intern:	
Printed Name of Contractor/Volunteer/Intern:	Job Title:

Staff Witness Signature:	
Staff Witness Printed Name:	Job Title:
Institution/Agency:	Date: