Memorandum of Understanding and Confidentiality Statement

Volunteer Printed Name	Date	
I hereby request permission to work as a volur of Corrections (ODOC). A volunteer/student provides services to the ODOC without mone includes, but is not limited to, occupational an whether or not they receive income from source.	intern is defined as any in- tary compensation from the a d programmatic volunteers, i	dividual who agency. This
I understand that I may be in direct contact wit of the ODOC, and some physical labor may be fully explained to my satisfaction, and I agree result from my volunteer work in and for the Ol	involved. All the dangers to me to fully assume all the risks	ne have been
I agree to hold harmless the ODOC for any and damages/injuries arising out of any activities a	•	•
I agree to complete an orientation session and	all required training.	
I understand, while serving as a volunteer fo specified in OP-090211, Attachment A, entitle for Volunteer Service."		
I understand that the donation of my time and a promise of employment, that I have no property released from my duties as volunteer at the dis	y interest in the position, and	
Only the following type of information may be r	eleased about inmates:	
1. Inmate Name — true and committed	5. Current inmate register r	number
2. Current place of incarceration	6. Current Age	
3. Race	7. Offense	
4. County of Conviction	8. Sentence information	
Inmate records will not be available to volunte of rendering authorized professional service.	ers unless they are needed i	n the course
Volunteer Signature	Witness Signature	Date
		(R 08/21)