

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 you answered no, please type 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 you answered no please type 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 you answered no please type 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 you answered no please type 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 you answered no please type 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 you answered no please type N/A.

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| Applicant Signature: _____ | Date: _____ |
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