

**DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE**


Schedule No. C1140


Page 1 of 2

Agency
Wicomico County

Division/Unit
Department of Corrections
Classification

Item No.	Description	Retention
1.	<p>Inmate Classification File Series</p> <ul style="list-style-type: none"> A. Pre-Classification Sheet B. PREA-Prison Rape Elimination Act of 2003 C. Inmate Orientation Acknowledgement, Diet D. Religion Affiliation, and Housing Form E. Progress Sheet F. Inmate Request Slip G. Mental Health Evaluation Request H. Medical Clearance Request I. Kitchen Clearance Request J. Parole Application K. Maryland Parole Commission – Recommendation L. Reclassification Form M. Parole Appeal Form N. Parole Waiver O. Parole Violation Hearing Master Docket P. Incident Report Q. Notice of Infraction R. Disciplinary Hearing Officer Report S. Disciplinary Hearing Notice of Results T. Notice of Assignment of Administrative Segregation U. Notice of Protective Custody Placement V. Notice of Protective Custody Removal W. Inmate Movement Sheet X. Inmate Cell Transfer Y. Segregation/Protective Custody Record and Certification Z. Work Release Eligibility AA. Weekly Job Assignment/Removal AB. General Correspondence 	Retain for seven (7) years after inmate's release, then destroy.

Schedule Approved by Department, Agency, or Division Representative.
 Date November 05, 2010
 Signature 
 Typed Name George Kaloroumakis
 Title Director

Schedule Authorized by State Archivist
 Date 2 Mar 2011
 Signature 

**DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE
(Continuation Sheet)**

Schedule No. C1140

Page 2 of 2

Agency
Wicomico County

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Department of Corrections
Classification

Item No.	Description	Retention
2	Volunteer File Series A. Volunteer Application B. General Correspondence	Retained for seven (7) years after inmate's release, then destroy.

<p>Instructions - Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>1</u> OF <u>3</u></p>
<p>1. Department/Agency Wicomico County</p>	<p>2. Division Department of Corrections</p>	<p>3. Unit Classification</p>
<p>DEFINITION: RECORD SERIES: A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>		
<p>4. Record Series Title Inmate Classification File</p>	<p>5. Earliest Year/Latest Year _____1995_____ to _____2010_____</p>	
<p>6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) All correspondence and forms used pertaining to inmate while incarcerated at this facility.</p>		
<p>7. Record Series Format(s) List all</p> <p>X Letter Size <input type="checkbox"/> Microfilm</p> <p>X Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>8. Record Series Sequence</p> <p>x Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume _150_____ Number</p> <p>x File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p> <p>10. Annual Accumulation _10_____ Number</p> <p>x File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____</p>
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually X As Needed</p>	<p>12. File Becomes Inactive After Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p> <p>Inmate is released from custody</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) Dept. of Corrections, Classification File Room 411 Naylor Mill Road, Salisbury, MD 21801</p>	<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) <input type="checkbox"/> Yes X No</p>	
<p>15. Access Restrictions (If Yes, cite Law(s) & Regulation(s)) X Yes <input type="checkbox"/> No Departmental Policy Maryland Commission of Correctional Standards</p>	<p>16. Audit Requirements <input type="checkbox"/> None X State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>	
<p>17. Is an Index System used? If yes, explain briefly and describe requirements <input type="checkbox"/> Yes X No</p>	<p>18. Recommended Retention Retain for 7 years after inmate is released, then destroy</p>	
<p>19. Name and Title of Preparer Nancy Paredes Classification-Programs Supervisor</p>	<p>20. Telephone Number 410-548-4858 ext. 418</p>	<p>21. Date 10/14/10</p>

INSTRUCTIONS – Type or print a Separate form for each new/revised electronic record series. Forward with Records Retention Schedule (DGS 550-1) COMAR 14.18.04	DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 (410) 799-1930	ELECTRONIC RECORDS INVENTORY
		Page <u>2</u> of <u>3</u>

1 DEPARTMENT/AGENCY Wicomico County	2 DIVISION Department of Corrections	3 UNIT Classification
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DEFINITION – Record Series: A group of related records stored electronically and used as a unit for reference as well as retention and disposition purposes

4 ELECTRONIC RECORD SERIES TITLE Inmate Classification File	5 EARLIEST YEAR/LATEST YEAR 1995 TO 2010
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6 INPUT - Identify source of information to be entered Inmate information received at Initial Classification	7 OUTPUT - Identify the use/s of information generated by system Security Rating and appropriate housing obtained by inmate background and charges.
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8 ELECTRONIC RECORD SERIES DESCRIPTION: Briefly describe the information/documents/forms contained in a series. Include purpose and function of the system.

Information obtained from inmate to include social, economic, and criminal background to determine appropriate housing and security rating.

9 POLICY ON ACCESS AND USE – Explain or attach copy if established in writing.

Designated Staff authorized to enter and review information into Offender Management System according to Wicomico County Personnel Manual Chapter 9, Software Policy Form 42 (9-20)

10 UPDATING CYCLES OR CONDITIONS AND RULES FOR REVISING INFORMATION IN THE SYSTEM

Information is updated as often and as necessary by authorized individuals.

11 SPECIFY THE LOCATION AND MEDIA OF THE MAIN ELECTRONIC DATA FILE. Explain the progression established to ensure the record's retention and usability throughout the record's authorized life cycle.

Electronic Data is maintained on the network server by the Wicomico County IT Department.

12 RECOMMENDED RETENTION:
Retain for seven (7) years after inmate's release; then destroy

13 TYPED OR PRINTED NAME OF PREPARER Nancy Paredes	14 TELEPHONE NUMBER 410-548-4858 ext 418	15 DATE October 22, 2010
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16 TITLE OF PREPARER
Classification/Programs Supervisor

Instructions –Type or Print a separate form for each new or revised record series. Forward with Records Retention Schedule (DGS 550-1)		DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 Waterloo Road, P.O. Box 275 Jessup, Maryland 20794 410-799-1930		AGENCY RECORDS INVENTORY PAGE <u>3</u> OF <u>3</u>	
1. Department/Agency Wicomico County		2. Division Department of Corrections		3. Unit Classification	
DEFINITION: RECORD SERIES: A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. Record Series Title Volunteer File			5. Earliest Year/Latest Year <u>1995</u> to <u>2010</u>		
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) All <u>correspondence</u> pertaining to volunteer services provided to the inmates.					
7. Record Series Format(s) List all <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Audio Tape <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Bound Book <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <u>2</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
		10. Annual Accumulation <u>2</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____			
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually As needed			12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) File becomes inactive after volunteer services are terminated.		
13. Current Location(s) (Bldg., Floor, Room) Wicomico County Detention Center, Security Bldg., 1 st floor, Classification File Room			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Access Restrictions (If Yes, cite Law(s) & Regulation(s)) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Departmental Policy Maryland Commission of Correctional Standards			16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent		
17. Is an Index System used? If yes, explain briefly and describe requirements <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			18. Recommended Retention Retain for 7 years after inmate is released, then destroyed.		
19. Name and Title of Preparer Nancy Paredes Classification – Programs Supervisor		20. Telephone Number (410) 548-4858 Ext. 418		21. Date November 5, 2010	

C1140

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