

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

Schedule No. C1146

Page 1 of 2

**Agency**  
Wicomico County

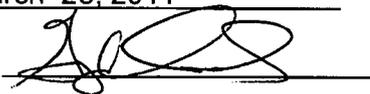
**Division/Unit**  
Department of Corrections  
Work Release

Item No.	Description	Retention
1.	<b>Paid Work Release Series</b> A. Employees Obligation Form B. Work Release Daily Activity Form C. Work Release Inmate Call in Form D. Work Release Detail Roster E. Special Detail Roster F. Work Release Withholding Form G. Work Release Rules and Regulations H. Work Release Data Sheet I. Work Release License Information Form J. Personal Information Form K. Job Site Check Form	Retain for 3 years after 100% compliance of Standards Audit, then destroy.
2.	<b>Drug Screening Series</b> A. Urine Specimen Chain of Custody B. Urine Control Form C. Alcohol Test Form D. Drug Court Supply Request	Retain for 3years after 100% compliance of Standards Audit, then destroy.
3.	<b>Work Release Officer Activities Series</b> A. Post Activity Log B. Search Log C. Lock Issue Form D. Rent Receipt Form E. Key Distribution Form F. Road Crew Log	Retain for 3 years after 100% compliance of Standards Audit, then destroy.

Schedule Approved by Department, Agency, or Division Representative.

Date March 23, 2011

Signature



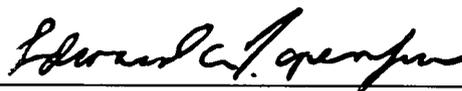
Typed Name George Kaloroumakis

Title Director

Schedule Authorized by State Archivist

Date 20 April 2011

Signature



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

**Schedule No. C1146**

Page **2** of **2**

**Agency**  
Wicomico County

**Division/Unit**  
Department of Corrections  
Work Release

<b>Item No.</b>	<b>Description</b>	<b>Retention</b>
4.	<p><b>Community Service Series</b></p> <ul style="list-style-type: none"> <li><b>A. Community Service Labor and Accountability Form</b></li> <li><b>B. Community Service Detail Roster</b></li> <li><b>C. Community Service Rules and Regulations</b></li> <li><b>D. Community Service Job Placement Form</b></li> </ul>	<p><b>Retain 3 years after 100% compliance of Standard Audit, then destroy.</b></p>

<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>4</u></p>
<p>1. Department/Agency  Wicomico County</p>	<p>2. Division  Department of Corrections</p>	<p>3. Unit  Work Release</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  Paid Work Release Series</p>	<p>5. Earliest Year/Latest Year  <u>2006</u> to <u>2010</u></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.)  Information pertaining to inmates assigned to paid work release status.</p>		
<p>7. Record Series Format(s) List all</p> <p><input checked="" type="checkbox"/> Letter Size    <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> 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><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume  <u>12</u>  Number</p> <p><input checked="" type="checkbox"/> 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  <u>24</u>  Number</p> <p><input checked="" type="checkbox"/> 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 checked="" type="checkbox"/> Daily    <input type="checkbox"/> Weekly    <input type="checkbox"/> Monthly    <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After  <u>3</u>  Number                      <input type="checkbox"/> Month(s)    <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room)  Wicomico County Detention Center, Work Release Bldg., 1<sup>st</sup> Floor, Work Release Office.</p>	<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.)  <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>	
<p>15. Access Restrictions (If Yes, cite Law(s) &amp; Regulation(s))  <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements  <input type="checkbox"/> None    <input checked="" type="checkbox"/> 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    <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention  Retain for 3 years from Audit and / or 6 months after 100 % compliance, then destroy.</p>	
<p>19. Name and Title of Preparer  Major Les Moore</p>	<p>20. Telephone Number  (410) 548-4850</p>	<p>21. Date  November 2, 2010</p>

<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 410-789-1930</p>	<p>AGENCY RECORDS INVENTORY</p> <p>PAGE <u>2</u> OF <u>4</u></p>
<p>1. Department/Agency Wicomico County</p>	<p>2. Division Department of Corrections</p>	<p>3. Unit Work Release</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 Drug Screening Series</p>	<p>5. Earliest Year/Latest Year <u>2006</u> to <u>2010</u></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.) Information pertaining to the Work Release, Drug Court Urine Screening Process.</p>		
<p>7. Record Series Format(s) List all</p> <p><input checked="" type="checkbox"/> Letter Size    <input type="checkbox"/> Microfilm</p> <p><input type="checkbox"/> 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><input type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume <u>4</u> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p> <p>10. Annual Accumulation <u>8</u> Number</p> <p><input checked="" type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel(s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (specify) _____</p>
<p>11. File is Used</p> <p><input checked="" type="checkbox"/> Daily    <input type="checkbox"/> Weekly    <input type="checkbox"/> Monthly    <input type="checkbox"/> Annually</p>	<p>12. File Becomes Inactive After <u>3</u> Number    <input type="checkbox"/> Month(s)    <input checked="" type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room) Wicomico County Detention Center, Work Release Bldg., 1<sup>st</sup> Floor, Work Release Room.</p>	<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>	
<p>15. Access Restrictions (If Yes, cite Law(s) &amp; Regulation(s)) <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>	<p>16. Audit Requirements <input type="checkbox"/> None    <input checked="" type="checkbox"/> 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    <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention Retains for 3 years audit and / or 6 months after 100% Compliance, then destroy.</p>	
<p>19. Name and Title of Preparer Major Les Moore</p>	<p>20. Telephone Number (410) 548-4850</p>	<p>21. Date October 22, 2010</p>

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 410-789-1930		AGENCY RECORDS INVENTORY  PAGE <u>3</u> OF <u>4</u>	
1. Department/Agency Wicomico County		2. Division Department of Corrections		3. Unit Work Release	
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 Work Release Officer Activities Series			5. Earliest Year/Latest Year 2006 to 2010		
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Information Pertaining to Daily Activities performed by Work Release Officers.					
7. Record Series Format(s) List all  <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm  <input 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 type="checkbox"/> Alphabetical  <input type="checkbox"/> Numerical  <input checked="" type="checkbox"/> Chronological  <input type="checkbox"/> Geographical  <input type="checkbox"/> Other (specify) _____		9. Volume <u>6</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>12</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			12. File Becomes Inactive After <u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) Wicomico County Detention Center, Work Release Bldg., 1 <sup>st</sup> Floor, Work Release Office.			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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No			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 3 years from audit and / or 6 months after 100% Compliance, then destroy.		
19. Name and Title of Preparer Major Les Moore		20. Telephone Number (410) 548-4850		21. Date November 2, 2010	

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>4</u> OF <u>4</u>	
1. Department/Agency Wicomico County		2. Division Department of Corrections		3. Unit Work Release	
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 Community Service Series			5. Earliest Year/Latest Year <u>2006</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.) Information pertaining to inmates assigned to Community Service Status.					
7. Record Series Format(s) List all  <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm  <input 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 type="checkbox"/> Alphabetical  <input type="checkbox"/> Numerical  <input checked="" type="checkbox"/> Chronological  <input type="checkbox"/> Geographical  <input type="checkbox"/> Other (specify) _____		9. Volume <u>4</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>8</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			12. File Becomes Inactive After <u>3</u> Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg., Floor, Room) Wicomico County Detention Center, Work Release Bldg., 1 <sup>st</sup> Floor, Work Release Office.			14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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19. Name and Title of Preparer Major Les Moore		20. Telephone Number (410) 548-4850		21. Date November 2, 2010	