



DEPARTMENT OF CORRECTIONS

NOTICE OF EMPLOYEE/CLIENT RELATIONSHIP/REQUEST FOR CONFLICT

Policy 20.1.3 – Code of Conduct: III, C, 2: Relationships with AIC/Offenders “3. Employees shall complete CD1472 (Notice of Employee/Client Form) and submit written notification to their supervisor, as soon as they know a relative or close personal acquaintance is an AIC or offender within Oregon which includes federal, state, county, and city or local law enforcement by filling out a CD1472.”
Policy 40.1.12 – Conflict Management (AIC) II, M, defines Staff Conflict. The policy allows staff to make a request for entry of a staff conflict and separation from an AIC when it is shown that the conflict raises to the level that would prohibit the employee’s ability to perform the duties of they/their job.

SECTION ONE: TO BE COMPLETED BY EMPLOYEE/VOLUNTEER/CONTRACTOR

Employee Name: _____ Work Section: _____

AIC-Offender Name: _____ SID (if known): _____

How long have you known AIC-Offender? _____

Please describe the circumstances and extent of your acquaintance with the above named AIC-Offender. Be as specific as possible. Be sure to include any pertinent information, such as: how you became acquainted; whether the relationship is of the past or still current. If a conflict request explain how this conflict would prevent you from performing your duties and any other details to explain the relationship. You may use the back of the form if additional space is needed.

Reason for CD1472:
[] Notice of Relationship
[] Request for Conflict

Employee Sign and Date: _____

SECTION TWO: Section Manager

Signed: _____ Date: _____

SECTION THREE: Designated Approver

Upon review of the preceding information, I recommend the following action:

Signed: _____ Date: _____

Designated Approver

NOTE: If Code of Conduct “Relationship” or Conflict is not recommended for conflict, it does not go past this stage. Place a copy of form in personnel and employee file.

SECTION FOUR: Conflict Review Committee

- If approved by designated approver, all staff conflicts must be reviewed and approved by Conflict Review Committee
• Email to staff-aicconflicts@doc.state.or.us for review/ approval

Based on the information provided above, the following action was taken: ___ Approve ___ Not Approved

Signed: _____

Date: _____

Conflict Review Committee Chair

Corrections Information System entry date: _____

copy: Superintendent; ISM; Program Manager; Personnel; Employee

(EmplClientRelationship)
CD#1472 (11/2020)