

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding is made this _____ day of _____, 2016, by and between Case Western Reserve University (“CWRU”) and _____ (hereinafter “Security Coordinator”).

WHEREAS, CWRU’s Police Department is implementing a community policing effort that is intended to make the CWRU community safer by sharing relevant security and police information that was historically limited in its dissemination;

WHEREAS, the CWRU Police Department has identified a group of staff members who have volunteered to be security coordinators and to become part of the “CWRU Watch”;

WHEREAS, the CWRU Watch members will receive confidential information via their CWRU email relative to campus crime patterns/trends and may also receive photos of individuals for which the CWRU Police want the community to be on the lookout; and

WHEREAS, Security Coordinator desires to be part of the CWRU Watch.

NOW THEREFORE, the parties agree to the following terms and conditions.

1. Voluntary Participation. The parties recognize that Security Coordinator is acting as a volunteer in this capacity for which the Security Coordinator shall receive no compensation.

2. No Agency Relationship. Security Coordinator understands that there is no agency relationship between the parties with respect to the subject matter of this MOU and that Security Coordinator is not authorized to act as an agent of the CWRU Police nor authorized to take any action on behalf of the CWRU Police.

3. Any information provided to Security Coordinator by the CWRU Police shall be

treated as confidential by the Security Coordinator and shall not be disclosed to any third party. Security Coordinator shall only disclose confidential information to other CWRU employees to the extent reasonably necessary to serve the purposes of the Crime Watch.

4. This MOU may be immediately terminated by either party upon written notice. Upon such termination, Security Coordinator shall immediately return all confidential information to the CWRU Police. The obligations of confidentiality set forth in paragraph 3 shall survive termination of this MOU.

IN WITNESS WHEREOF, the parties execute this MOU effective of the date first affixed above.

CWRU
CWRU POLICE

Security Coordinator – Printed Name

By: Daniel J. Schemmel

Security Coordinator - Signature

Title: Detective Sergeant

Email Address

Date: _____

Office Phone Number

Campus Building and Office Number