UNIVERSITY OF CINCINNATI (UC)
AGGRESSION REPLACEMENT TRAINING (ART)
TRAINING-OF-TRAINERS (TOT) MEMORANDUM OF UNDERSTANDING

Under this Agreement, ____________________________________________(PRINT AGENCY TRAINER NAME), from___________________________________________________(PRINT AGENCY NAME), I consent to the following

(a) I acknowledge and understand this Aggression Replacement Training® training-of-trainers’ protocol as outlined in the attached description.

(b) I forfeit all rights to train the Aggression Replacement Training® curriculum upon termination of employment with the contracting agency, full-time, part-time, or contractual, unless specific permission is granted by the University of Cincinnati Corrections Institute (UCCI).

(c) I will not train the Aggression Replacement Training® curriculum outside of my employment or current relationship with the contracting agency, as an independent contractor or consultant, either for profit, or in any way that competes with the training offered by the University of Cincinnati Corrections Institute (UCCI).

(d) Upon completion of each training session, I will submit the names/titles/email addresses of all trainees who completed the full end user training (if applicable, identifying pass/fail status of certification exam) to the University of Cincinnati Corrections Institute (UCCI) via email at corrections.institute@uc.edu.

(e) I understand that recertification training is required every three years after initial certification as an Aggression Replacement Training® trainer.

_________________________________       _______________
Trainee         Date

_________________________________         _______________
University of Cincinnati Representative      Date