UNIVERSITY OF CINCINNATI (UC)
COGNITIVE BEHAVIORAL INTERVENTIONS FOR SUBSTANCE ABUSE (CBI-SA)
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 UC’s Cognitive Behavioral Interventions for Substance Abuse (CBI-SA) training-of-trainers’ protocol as outlined in the attached description.

(b) I forfeit all rights to train UC’s Cognitive Behavioral Interventions for Substance Abuse (CBI-SA) material 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 UC’s Cognitive Behavioral Interventions for Substance Abuse (CBI-SA) 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 recognize that the University of Cincinnati holds ownership and copyright of UC’s Cognitive Behavioral Interventions for Substance Abuse (CBI-SA) curriculum, and as such I will abide by all copyright laws and restrictions as outlined by the curriculum.

_________________________________       _______________
Trainee                                    Date

_________________________________       _______________
University of Cincinnati Representative   Date