

Program registration/Approval Form

To be completed no less than 30 days prior to the commencement of the program/event

Name of Program: _____

Program Administrator: _____

Please check whether this program is:

- Ongoing
- One-Time Occurrence

Program Date(s) and Location:

Start Date: _____ **End Date:** _____

Location:

- On-Campus
- Off-Campus

Overnight Stay?

- YES
- NO

If on-campus, which of the following will be used (specify which facility):

- Outdoor fields: _____
- Gymnasium: _____
- Classrooms: _____
- Offices: _____
- Auditoriums: _____
- Dormitories: _____
- Labs: _____
- Food Services: _____

Estimated Number of Participants by Age Group:

- _____ 6 month – 5 Years
- _____ 6 Years – 8 Years
- _____ 9 Years – 14 Years
- _____ 15 Years – 17 Years

What is the ratio of Authorized Adults, (refer to the Minors on Campus Policy for definition of Authorized Adult), to Minors (See Section C. Authorized Adult to Minor Ratio):

Do all Authorized Adults meet USF requirements concerning background checks, training, etc...?

- YES
- NO

Describe Minor's Activities in Program:

Transportation Provided by USF?

- YES
- NO

Please attach any administrative requirements (e.g. waiver, permission slip, emergency medical form, list of authorized adults, list of volunteers, if applicable)

Signatures:

Program Administrator:

Printed Name: _____

Title: _____

Signature: _____

Date: _____

Vice President / Dean

Printed Name: _____

Title: _____

Signature: _____

Date: _____

A copy of this completed and signed form must be delivered to the Director of Environmental Health, Safety and Risk Management within 30 days of the conclusion of the program/event to be kept for retention purposes.