## GEORGIA STATE UNIVERSITY MANDATORY CHECKLIST: PROGRAMS FOR MINORS ON CAMPUS

Submit completed checklist annually to the Office of Risk Management

Program	
[ ] All planned activities are consistent with the institution's mission.	[] Facility Usage, Insurance & 3rd Parties [] Facilities have been reserved and there are no scheduling conflicts;
[] Program has a designated director.	[] Appropriate forms completed;
[] Safety & Security planning [] Background checks on	[] If 3rd party involved, has Facilities Use or License Agreement approved by Legal Affairs;
volunteers, staff and student workers;  [] Policies/rules in place for participant, volunteer and staff	[] Appropriate insurance obtained, if applicable General liability - Other insurance
conduct; [ ] Appropriate participant-to-staff ratio provided (consideration of age & activity); [ ] Guest visitation protocols in place;	[] Training for Staff, Volunteers & Counselors [] Safety & security;
	<ul><li>[ ] Emergency response;</li><li>[ ] Reporting and responding to incidents of misconduct;</li></ul>
[] Check-in & check-out procedures in place;	[] Participant conduct management and disciplinary procedures;
<ul><li>[ ] Inclement weather protocols in place;</li><li>[ ] Established protocol for injury or</li></ul>	[ ] Detecting and reporting abuse or neglect [ ] Process for reporting of injury or illness; [ ] Institution policies/Code of Conduct;
illness; [] Protocol for reporting and responding to participant, staff or	[ ] Orientation planned for participants to review rules and reporting procedures.
volunteer misconduct (including mandatory reporting);  [] Emergency notification procedures in place;	[] Program Staffing Forms [] Volunteer agreements signed, if applicable; [] Staff and (if applicable) Volunteer Code of Conduct agreements signed.
[] Inspection of facilities to be used.	
[ ] Appropriate Forms & Waivers [ ] Participation Agmt and Waiver;	Program Director
[] Emergency Contact, Medical Information and Authorization for Medical Care;	Name:
[] Pick Up Authorization, if applicable;	Signature:
[] Sports physical, as applicable.	Date sent to Risk Management:
[] Transportation [] Transportation needs have been identified;	

[ ] Authorized vehicles and drivers have been arranged, if applicable.