

# University of Findlay

## Checklist for Programs with Minors

Item	Yes/No	Further Steps
<b>Program Registration</b>		
Have you submitted a completed Program Registration/Approval Form to the appropriate Cabinet Member?		
Have you submitted any additional administrative forms or protocols associated with this program? (waivers, permission slips, medical emergency forms, etc.)		
Have you received approval back from the appropriate Cabinet Member?		
Have you submitted copies of signed Program Registration/Approval Form and administrative forms to Facilities, Scheduling & Events?		
<b>Program Staffing</b>		
Do you have enough Authorized Adults to meet or exceed the minimum Authorized Adults to Minor ratios established in "Requirements and Best Management Practices for Minors on Campus"?		
Have all Authorized Adults passed a criminal background check (required every 4 years)?		
Have you checked all Authorized Adults and Volunteers' names against the National Sex Offender Registry?		
Have you reported all positive results from the criminal background checks and the National Sex Offender Registry Search to the Vice President for Student Affairs?		
<b>Program Training</b>		
Have all Authorized Adults successfully completed EIIA's Online Training within the past three years? (two courses)		
<b>Do you have a supervision plan, and have you reviewed it with all Authorized Adults and volunteers:</b>		
• Outline abuse/molestation reporting requirements		
• Provide copies of UF's Title IX Policy, Minors on Campus Policy, and the Best Management Practices for Minors on Campus		
• Identify the Manager responsible for all Authorized Adults		
• Roster of Authorized Adults broken down by employees, students, and volunteers		
• Additional Authorized Adults to Minor ratios based on activity		
• Being alone with a Minor		
• Bathrooms and Locker rooms		
• After hours and off-site activities		
• Use of Authorized Adult or volunteer's home		
• Use of personal vehicles		

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Item	Yes/no	Further Steps
• Friendships and gifts		
• Use of physical restraint		
• Communication with Minors		
• Sexual activities, remarks, or materials		
• Drug and alcohol restrictions		
• Touching & Restrictions		
• Personal behavior		
Supervision or any overnight programs: <ul style="list-style-type: none"> <li>○ Curfews</li> <li>○ Visitation</li> <li>○ Free time</li> <li>○ Facility use</li> </ul>		
<b>Do you have a written communication plan, and have you reviewed it with all Authorized Adults and volunteers:</b>		
• Parent contact information		
• Emergency contact information (other than parent)		
• Procedure to notify parents in the event of an Emergency		
• Procedure for parents to contact participants		
<b>Do you have a written medical emergency plan, and have you reviewed it with all Authorized Adults and volunteers:</b>		
• Authorization to transport Minor to hospital		
• Authorization for emergency medical treatment		
• Disclosure of allergies or other medical conditions		
• Written incident or accident reports		
• Emergency procedures for likely emergencies		
<b>Do you have a written transportation plan, and have you reviewed it with all Authorized Adults and volunteers:</b>		
• Establish procedures for pick-up and drop-off		
• Release of Minors to parents/legal guardian only, unless given written authorization otherwise		
• Required to check ID if person picking up Minor is not known		
• Authorized Adults not to give Minors ride home unless written authorization is given		