



THIRD PARTY ACKNOWLEDGEMENT OF RESPONSIBILITIES

For use with programs/events sponsored by third parties except for standard school sponsored fieldtrips or events. This form is to be completed by the person in charge of hosting the event or program and submitted to the U-M facilities manager.

PROGRAM/EVENT INFORMATION

Program Name: _____

Program Director: _____

Program Address: _____

Program Dates: _____

Program Director Phone: _____ Email: _____

U-M Facility: _____

Campus Ann Arbor Michigan Medicine Dearborn Flint

U-M Facility Manager: _____

U-M Facility Manager's Phone: _____ Email: _____

DUTY

By hosting a program/activity in a U-M facility, you are accepting a legal duty to operate the program/activity in a reasonably safe manner. You agree to indemnify, defend and hold the university harmless for any and all claims, causes of action, demands and damages arising out of or relating in any way to the program/activity.

REQUIRED FORMS

- **Facilities Use Agreement:** The Facilities Use Agreements are obtained from the location where the event is to be held. General Liability insurance with limits of \$1 million per occurrence/\$1 million aggregate is required. Automobile Liability with the same limits is required if transportation of children in vehicles is planned. The Regents of the University of Michigan should be named as an additional insured. You must ensure your insurance covers Workers' Compensation claims for your employees and volunteers located on University premises.
- **Parental Authorization and Waiver** that informs participants and their parents/legal guardians that the third party organization's event or program is neither endorsed nor sponsored by U-M.
- **Medical Information and Treatment Authorization**

CRIMINAL BACKGROUND CHECKS

All adult employees or volunteers working at the program/activity must have successfully completed a criminal background check, including the National Sex Offender Registry, within the past two years. You certify that only employees/volunteers who have successfully passed a background check within the past two years will be associated in any way with the program/event. This requirement includes parents of participants where the parent is assisting with the program/event. Unless the parent has undergone the background check and executed all the forms associated with the program/event, they may not assist with the program/event.

SUPERVISION

Supervision is defined as having the children/teens minor within your line of sight. Ensure that there is an appropriate chaperones/supervisors ratio. The university generally requires a minimum adult supervisor/ chaperone ratio as outlined below.

Age Range	Number of Adults	Number of Children
Under 18 months	1	2
18 mo. – 2 years	1	4
2 years – 5 years	1	8
5 years – 9 years	1	10
10 years – 13 years	1	12
14 years +	1	20

However, depending on the age of the participants and the nature of the activity, higher or lower ratios may be advisable.

Designate at least one person as a head chaperone and provide their contact information to the University representative. The head chaperone must ensure all participants are properly supervised. Where participants are staying overnight, chaperones must have a schedule of who is on call and provide contact numbers to the Housing representative. Every participant must be chaperoned at all times by an authorized adult while participating in the program/activity.

Head Chaperone Name: _____

Phone: _____

*All U-M daycare facilities are licensed. For More Information contact- [Work-Life Resource Center](#).

CODE OF CONDUCT

Make sure your employees/volunteers understand, and you have reviewed, the state requirements on reporting suspected child abuse. Ensure that all authorized program adults have reviewed what constitutes inappropriate contact with child participants and what is not acceptable.

SAFETY AND SECURITY

To ensure the safety and protection of children and teens, establish security measures (e.g., where to meet and where to go if lost), and instruct them to communicate the security measures to the children or teens on a daily basis.

- Ensure that you have reviewed security measures with your staff and that they know who to talk to if they need help.
- Ensure the participants and their parents know where and how to report any injuries or incidents.
- Parents of children and teens must be provided with contact information to Risk Management to report any injuries. Reports may be submitted via the website at <http://finance.umich.edu/risk-management/injury-report-for-non-employees> or by calling (734) 764-2200.
- Ensure that participants are checked in and out by approved parents or guardians and that proper identification is obtained and reviewed each time.
- Ensure that you have reviewed emergency evacuation measures with authorized program adults and participants.
- Ensure that participants and their parents know where children will be picked up if they have missed the standard pick-up and drop-off times. Ensure you have a secure pick-up and drop-off protocol that permits only parents or legal guardians to pick up minors. You should require photo identification of these individuals.
- If someone other than the parent is to pick up the minor, you must obtain written authorization from the parent/legal guardian and require valid identification from the person authorized to pick up the child/teen.
- Parents must give permission in writing for their children to drive themselves or ride with another person to and from the event.
- Ensure minors are aware of behavioral expectations.
- The information given to children/teens will depend on their ages. At a minimum, they must be told where to get help if they need it.

PRIORITY USAGE

By signing this document, you signify awareness of the fact that you may be required to vacate the SMTD space you are occupying when SMTD students, faculty and/or staff require the space for authorized activities. (i.e. practice, rehearsal, study sessions, special events, etc.)

REPORTING OBLIGATIONS

General

It is important to act immediately when criminal activity is taking place, or in a circumstance where you find yourself either a victim or a witness to questionable activity. If you require immediate emergency assistance or believe a crime is in progress, dial 9-1-1 to connect you to the police. For a non-emergency situation, call the appropriate campus Department of Public Safety and Security. Campus law enforcement professionals can help assess the situation and determine what other notification or action is necessary.

Ann Arbor (734) 763-3434
Dearborn (313) 593-5333
Flint (810) 762-3333

Information on potential criminal activity also may be reported to the university anonymously by calling the university's anonymous tip line at 1-800-863-1355. If you believe you have seen wrongdoing in the course of your daily activities on campus, you can report the situation anonymously through the university's compliance website at compliancehotline.umich.edu or call the Compliance Hotline at 866-990-0111. The Hotline is available 24 hours a day and is staffed by multilingual interview specialists.

Known or Suspected Abuse or Neglect of Minors

You do not have to know for certain that abuse is taking place. Reasonable cause to believe or suspect that child abuse has occurred is sufficient. Anyone who knows, suspects, or receives information indicating that a child/teen has been abused or neglected, or who has other concerns about the safety of child/teen MUST inform the appropriate campus Department of Public Safety and Security. Ann Arbor (734) 763-3434 Dearborn (313) 593-5333 Flint (810) 762-3333 Anyone who knows or suspects abuse or neglect of a child/teen should also notify the Michigan Department of Human Services by calling 855-444-3911.

Mandated Reporters and Their Legal Obligations Michigan's Child Protection Law, MCL § 722.621, et seq., designates individuals in certain occupations and professions as mandated reporters. Mandated reporters must immediately report known or suspected mental or physical abuse or neglect of a child made known to them in their professional or official capacity directly to the Department of Human Services by calling 855-444-3911 (24/7 toll free number). These guidelines supplement all university guidelines, policies and procedures. If you have any questions about this document, please call your university contact or Risk Management Services at 734-764-2200.

I have read and agree to abide by these guidelines and attest to my understanding of the guidelines and certify my compliance with them.

Signature: _____

Print Name: _____

Date: _____