** UNIVERSITY OF WISCONSIN-LA CROSSE (UWL)**

**YOUTH ACTIVITY CHECKLIST**

**Name of Activity Date(s)**

**Activity Director**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Required Document | University Custodial Youth Program | University Non-Custodial Youth Program | Third-Party Custodial Program | Third-Party Non-Custodial Program | UWL Student Organization |
| Program Registration |
| Complete Program Registration Form | X | X | X | X | X |
| Required Documentation & Forms |
| Screening CBC \*Only DI must complete a CBC | X | X | X | X | Depends whether custodial care or not |
| Program Staff Roster | X |  | X | X | X |
| Program Participant Roster | X |  | X |  | X |
| Program Emergency Plan | X | X | X | X | X |
| Youth Health Form | X |  |  |  |  |
| Youth Supervision Plan | X |  |  |  |  |
| Overnight Program Mental Wellness Safety Plan | X\*Overnight programs |  |  |  |  |
| Overnight Program Staff Code of Conduct | X\*Overnight programs w/ chaperoning parents/teachers |  |  |  |  |
| Overnight Program Youth Code of Conduct | X\*Optional: Overnight programs w/ chaperoning parents/teachers |  |  |  |  |
| Third-Party Youth Program Acknowledgement |  | X | X | X |  |
| Field Trip Permission Form |  | X |  |  |  |
| Online Training WI Mandated Reporter  | X | X | X | X | X |
| Training UWL Youth Protection Course | X | X | X | X\*Volunteers are exempt | X |
| Liability & Contracts |
| Facility Use Agreement |  | X | X | X | X |
| Certificate/Proof of Insurance | X | X | X | X | X |

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| --- |
| Registration |
|  Submitted Program Registration Form |  |  |
| Required Documents & Forms |
|  Third-Party Youth Program Acknowledgement |  Program Staff Roster |  Program Participant Roster |
|  Program Emergency Plan |  Youth Health Form |  Youth Supervision Plan |
|  Overnight Program Mental Wellness Safety Plan |  Field Trip Permission Form |  Staff Training Verified |
|  Overnight Program Staff Code of Conduct |  CBC |  Contracts/Insurance/MOU |