

SCHOOL ACTIVITY APPENDIX

This appendix is intended to be utilized by school(s) with authorized agreements participating in a scheduled educational activity to document compliance of this agreement between both parties.

Activity Details			
Date		Time	
Participating School			
Educational Activity			
School Facilitator		UWGB Facilitator	
GPABS Program Requirements			
Place Checkmark for all that apply			
Accepts Supervision of all Minor Participants		Chaperones have completed CBC and/or Reference Checks	
Confirms Supervision Ratio is Maintained		Confirms Supervision and/or Chaperones understand Prohibited Conduct and Mandatory Reporting requirements	
Maintains Staff Roster on File		Maintains Participant Roster on File	
Activity Comments			
Note any additional information UWGB should be aware of			

The undersigned acknowledges compliance to this agreement and that all youth protection protocols have been met.

 School Activity Facilitator
 School Name

 Date