



THIRD PARTY ACKNOWLEDGEMENT OF RESPONSIBILITIES

For use with programs/events sponsored by non-University, third parties. This form is to be completed by the Program Director in charge of managing the event or program, and submitted to the Chief Risk & Compliance Officer with other required Program documents.

Program/Event Information

Program Name: _____

Program Director: _____

Program Dates: _____

Program Director Cell Phone: _____ Email: _____

Wilkes University Facility Name: _____

DUTY

By hosting a program/activity at Wilkes University, you are accepting a legal duty to operate the program/event in a safe manner consistent with the policies of Wilkes and all applicable laws. 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.
- Abuse & Molestation Insurance: A separate Abuse and Molestation insurance in the amount of \$1,000,000 each occurrence and \$2,000,000 general aggregate, unless this coverage is specifically included in the comprehensive commercial general liability insurance policy. Evidence of specific inclusion shall be required. If coverage for abuse and molestation is not specifically included in the commercial general liability coverage, a separate policy or rider shall be required as evidence of said insurance. Policy/ies shall be on an occurrence basis only.
- 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 Wilkes University.

CRIMINAL BACKGROUND CHECKS

All adult employees AND 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.

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.

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.

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 Department of Public Safety at (570) 408-4999. Public Safety professionals can help assess the situation and determine what other notification or action is necessary.

Information on potential criminal activity also may be reported to the university anonymously by calling the university's anonymous tip line at (570) 408-2273.

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 https://secure.ethicspoint.com/domain/en/report_custom.asp?clientid=17812 or call the Compliance Hotline at (888) 332-6790. 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 Department of Public Safety.

Anyone who knows or suspects abuse or neglect of a child/teen should also notify the Commonwealth of Pennsylvania's Department of Public Welfare by calling the PA ChildLine at (800) 932-0313.

Mandated Reporters and Their Legal Obligations

(As defined in 23 Pa. Cons. Stat. § 6303) Persons who, in the course of their employment, occupation, or practice of their profession, come into contact with children, including all Program Staff. Additionally, any person may make such a report if that person has reasonable cause to suspect that a child is an abused child.

All Wilkes University employees, students, independent contractors and volunteers (collectively "Required Reporters") have a personal responsibility to report any instances of known or suspected abuse, molestation or neglect relating to children. If a minor is in imminent danger, the discoverer must:

1. Make all reasonable efforts to remove the minor from dangerous or potentially dangerous situations, irrespective of any other limitation or requirement
2. Contact the police at 911 to obtain immediate protection for the child.
3. Contact the Commonwealth of Pennsylvania's ChildLine at (800-932-0313)

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 participants and that it is not acceptable.

Ensure that all Authorized Program Adults have reviewed the Code of Conduct outlined in the Minors on Campus Policy.

SAFETY AND SECURITY

- 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.
- 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, permitting 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.
- 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.

These guidelines supplement all university guidelines, policies and procedures. If you have any questions about this document, please call your university contact or Risk & Compliance Management at (570) 408-4554.

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: _____
Program Director

Print Name: _____

Date: _____