Activities and Programs with Minor Participants

Departmental Request for Exemption

Please be advised that while this request is being evaluated, that you must abide by the “Activities and Programs with Minor Participants” policy. This form must be reviewed and signed by the dean or Vice President (or designee) prior to being submitted to the Youth Policy Coordinator and reviewed by the Minors Policy Governance Committee. The completion and submission of this form does not reduce or eliminate the university requirement to register the program.

Exemption request is due at least eight weeks prior to activity/program taking place. A decision will be made at least four weeks prior to activity/program starting. If you require an expedited process due to an extenuating circumstance, please contact Youth Policy Coordinator immediately.

SECTION 1: BACKGROUND

<table>
<thead>
<tr>
<th>Name of Activity/Program</th>
<th>Sponsoring Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of Activity/Program</td>
<td>Department</td>
</tr>
<tr>
<td>Address</td>
<td>Email Address</td>
</tr>
<tr>
<td>Dean/VP of Activity/Program</td>
<td>Department</td>
</tr>
<tr>
<td>Address</td>
<td>Email Address</td>
</tr>
</tbody>
</table>

SECTION 2: ACTIVITY/PROGRAM INFORMATION

Description and nature of activity/program involving minors:

________________________________________________________________________

Dates/times/location of activity/program:

________________________________________________________________________

Does the activity or program involve overnight stay?  □ Yes  □ No

Where? ________________________________________________________________

Have all activity/program personnel been background checked?  □ Yes  □ No

Have all activity/program personnel completed training as it relates to the policy?  □ Yes  □ No

Section from the policy from which you are requesting an exemption? __________________________

Please explain in detail why this activity/program should be exempted from all or part of the policy?

________________________________________________________________________

________________________________________________________________________

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What steps will you take to promote the safety of minors in lieu of exemption area if approved?

Please attach a staff roster of those that would be working with minors for this particular activity/program.

SECTION 3: SIGNATURES

Signature of Activity/Program Director ____________________________ Date ____________

Signature of Sponsoring Unit Dean or VP (or designee) ____________________________ Date ____________

Request, and roster, due to Youth Policy Coordinator at least 8 weeks prior to activity/program taking place. Earlier requests are encouraged and multiple requests can be made at once. Decisions are good for current academic year only and subsequent requests must be made annually. Request due via email to bond.217@osu.edu.

***Office Use Only***

Date request received: ____________ Date decision communicated to requester: ____________

Decision made: ____________________________

Notes: ____________________________

Youth Policy Coordinator signature: ____________________________

For additional information contact the Office of Human Resources Youth Policy Coordinator:
Lindsay Meyer Bond, Phone: 614-688-8643, Email: bond.217@osu.edu, hr.osu.edu.
Address: 1590 N. High Street, Suite 430, Columbus, OH 43201-2190.