UCSC RISK SERVICES

Activity or Event Risk Assessment Form

- More space is provided in the Additional Information section on the last page.
- · Attach additional pages and documents as needed.
- Submit this request for risk assessment to UCSC Risk Services only after the activity or event has been well vetted within the division or unit proposing the activity *and* only if there is support for the activity within the division or unit proposing the activity (or at least support for additional review of the activity).
- Initial turn around time is approximately 10 business days.

CONTACT INFORMATION				
Phone	Email			
Phone	Email			
Start Time (include set-up time)	End Time (include tear-down time)			
On-campus locations – state the specific space and the name of the space manager Off-campus locations – describe fully including name of location and distance from campus; attach any contracts, agreements or other documents requiring signature or expressing terms of space use or access. Off-campus space use or access may trigger the involvement of the Real Estate Office and/or Procurement and Business Contracts. Please work with your unit as needed.				
	Phone Start Time (include set-up time) Independent of the space manager The space manager manager and the name of location and distance from campus; attack as of space use or access. Off-campus space use or access.			

TRANSPORTATION		
Type of transit involved with activity: (check one or more)	Who is driving? (check one or more)	
☐ No transportation will be involved	☐ Staff	
☐ Public transit	☐ Faculty	
☐ Personal vehicles	☐ Students	
☐ UCSC Fleet rental vehicle	☐ Volunteers	
☐ Other rental vehicles	☐ Other:	
☐ UCSC TAPS chartered bus	☐ No driving will be involved	
☐ Other chartered bus		
☐ Boat		
☐ Other:		
What risk control measures are in place for transportation and/or driving?		
PARTICIPANTS		
Participants include organizers as well as attendees. Organizers have some		
Attendees are not responsible for organizing or running the event. For each	h category, include the approximate number of participants.	
Number of Number of Attendees Organizers None Category		
☐ Sponsoring unit staff		
Other unit staff		
Faculty		
UCSC students		
Other students		
Community members		
Businesses, non-profits or governmenta	Lorganizations	
	- Constitutions	
DONORS, SPONSORS, VENDORS		
Any of the following may trigger review by the Real Estate Office. Please if your activity involves any of the following.		
Is any individual or group – including companies, non-profits and government	nental entities:	
Charging the participants? Yes No		
Donating their services, goods or time?		
Sponsoring or co-sponsoring the activity with the campus unit?	Yes No	
If yes (to any of the above), provide additional details		
Tryes (to any or the accord), provide additional details		
Payments by campus or university: (check one)		
☐ This activity does not have any charges associated with it		
This activity involves purchases of goods and/or services. Include any CruzBuy, Procard, Direct Payment, and any other purchases. Describe the purchases:		

ENTERTAINMENT AND EQU	IPMENT		
Does the activity include any of the following? (check all that apply and describe fully below)			
☐ Food	☐ Bleachers	☐ Water features (pools, streams, tanks,	etc.)
☐ Animals	Tents	☐ Loud speakers/amplification equipme	nt
☐ Medical personnel	☐ Bounce houses	☐ Power generation including extension	cords used outside
☐ Referees and/or coaches	☐ Slides	☐ Rental or use of any other equipment	
☐ Temporary stages	☐ Climbing walls	☐ Other	
Describe fully any choices above and any	additional entertainment, equipm	ent or activities	
ADVERTISING			
Describe how the activity will be advertise email, announcements, paid advertising,		will be distributed (for example: posters, flyers, Fac-	cebook, Twitter,
email, announcements, pata davertising,			
ROLES AND RESPONSIBILIT	TIFC		
What UCSC staff or faculty will be on sit		e activity?	
Name(s)		Position(s)	
Describe the responsibilities of UCSC sta	iff or faculty		
Describe what role(s) students will have i	in organizing or running the activ	у	
OR students will not have a role in	n organizing or running the activity	/	
Describe what role(s) anyone other than of	campus faculty, staff and students	will have in organizing or running the activity	
		role in organizing or running the activity	
Describe adea in many constitutions of		I shama in manada m	4
Describe who is responsible for any set-up, tear-down and clean-up OR 🔲 there is no set-up, tear-down or clean-up associated with the event			

RISK MANAGEMENT
What could go wrong during the activity?
What risk control measures will you have in place for the activity?
Are you obtaining an Elective/Voluntary Activity Waiver for the activity or event?
For any activity that lasts more than four hours, attach an event agenda Agenda is attached Activity is less than four hours
Have you consulted with others about the activity? For each person consulted include the name of the person, their position and the outcome of your consultation. <i>Consider if expert advice is needed for food safety, additional sanitation needs, power generation, etc.</i>
your constitution. Constact ly expert durine is necessary, your superfy, dualitional summation necess, power generation, etc.
ADDITIONAL INFORMATION
Use this space for any additional comments that you would like to offer about your activity and to continue responses from elsewhere in the form
FORM SUBMITTAL

Submit this form to PropertyCasualty@ucsc.edu as an email attachment. Attach any documents that you think would be beneficial for Risk Services review, including any agreements or documents that another party has asked you to review and/or sign. Attach additional pages as needed to fully describe your activity or event.