



## Programs for Minors Survey

The following survey helps ensure the agency is compliant with System Regulation [24.01.06](#) Programs for Minors. Please complete and submit form to the Environmental Health and Safety Officer.

Program Name:		
Event Date(s):		
Department Head or Program Leader:		
Third Party Organization Director/Leader:		
Brief Program Description:		
Does the program involve participants under the age of 18?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the program sponsored and operated by the agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the program sponsored and operated by a third party?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the program operated on agency property/facilities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the program last for more than two consecutive days (for same participants) without an overnight stay?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the program involve an overnight stay for participants?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are participants attending the program as part of their school activities and under the supervision of school personnel?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are participants transported in agency vehicles by agency staff?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does agency staff exercise full supervisory duties (i.e. supervision, instruction and/or recreation apart from parent/guardian) over participants at any time, either in whole or in part?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the third party's staff or chaperones always accompany participants during program (including during any transport in agency vehicle)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the third party's staff exercise full supervisory duties (i.e. supervision, instruction and/or recreation apart from parent/guardian) over participants at any time, either in whole or in part?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Please attach any additional explanatory information, as needed.</b>		
Prepared by: <hr/> Name	Signature	Date