



OUTREACH PROGRAM AGREEMENT FORM

As the authorized representative of __

____, participating in a

McCall Outdoor Science School (MOSS) residential program, I understand the following:

Acknowledge & agree:

- MOSS requires at least one school / program approved adult chaperone per field group. MOSS strongly suggests that two school / program approved adult chaperones be provided for each field group. High School students may not fulfill the role of a chaperone.
- The school / program organizers are solely responsible for the supervision and safety of students at all times students are not directly engaged in MOSS programming.

Actions you agree to do and confirm completed by others:

- All adults teaching and facilitating our programs have passed background checks. View the University of Idaho Administrators Procedural Manual Protecting Minors section for more information: <u>http://www.uidaho.edu/apm/05/12</u>. We encourage you to consider your school's protecting minors best practices in regard to the teachers, chaperones and volunteers you recruit to participate in this program. Contact Beth Kochevar, the MOSS Risk Manager, with questions or concerns, ekochevar@uidaho.edu
- All participants in a MOSS program must complete the online enrollment prior to arrival. Anyone arriving to the program without an enrollment on file will be required to leave immediately at the school / program's arrangement and expense.
- If your school / program provides specific services for students i.e., interpreters, braille, one on one aids, etc. — your school / program remains responsible for providing these services during the MOSS program.
- The school / program is responsible for communicating information about students, teachers and chaperones that will benefit instruction and the program. The Pre-Program Questionnaire and the pre-program phone call with the Program Coordinator are two predetermined opportunities to communicate considerations. Please reach out anytime for a chat.

By signing my name below, I signify that I have read and understand the policies outlined above. I understand and agree that any action on my part, or by the group I am responsible for, that contradicts any portion of these policies is grounds for program cancellation or immediate removal from McCall Field Campus property at the group's arrangement and expense. I understand that the cost of damage to or theft of any university property will be billed to the individual or group responsible.

(printed name of authorized representative) / _____ (signature) / _____ (date)

COLLEGE OF NATURAL RESOURCES • MCCALL OUTDOOR SCIENCE SCHOOL

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