

# Extension Event or Site Visit Plan for Essential In-Person Programming

(Version 3 updated 6/2/2020)



*Describe in detail your approach to handle each of the items below as it pertains to your requested event(s). Events can be clustered, such as “lawn checks” or “small acreage site visits”, and need only be filled out once monthly and submitted along with a list of names/addresses/dates for which the events will occur. This plan must be approved prior to the event occurring.*

<b>Name of Program/Event:</b>	
<b>County:</b>	<b>Event Organizer (Your) Name:</b>
<b>Proposed Dates:</b>	<b>Location/address (provide list for cluster events):</b>
<b>Expected Attendance:</b>	<b>Participant Age Group:</b> youth      and/or adult
<b>Requirements for event participation in an effort to prevent the spread of COVID-19:</b>	
<ul style="list-style-type: none"> <li>• Social distancing of at least 6’ between participants must be followed.</li> <li>• Volunteers must complete the Volunteer Informed Consent form.</li> <li>• All programs, events, and interactions must follow local public health guidance.</li> <li>• Ensure that language provided about assumed risk for adult participation is posted clearly at event check-in.</li> </ul>	
<b>Program Description:</b>	
<b>Program Purpose/Desired Outcomes:</b>	
<b>Explain why this cannot be completed virtually:</b>	
<b>Attach a list of participant’s/people that will be present, including staff and volunteers:</b> (list can be amended at the end of the month)	
<b>Describe event location in the context of ability for social distancing:</b>	
<b>Provide a short overview of how you will keep participants, volunteers safe during this event:</b>	
<b>Is your County Health Department/Council/Commission giving any guidance that should preclude you from holding this event?</b> Yes                      No	

<b>For Master Gardener and 4-H activities, has the plan been discussed with state office leadership?</b>		
<b>Yes</b>	<b>No</b>	<b>Notes:</b>
<b>Supplemental Documentation for Health and Safety:</b>		
<ul style="list-style-type: none"> <li>• Volunteer COVID-19 Informed Consent form will be used (<b>volunteers must sign form for each event</b>).</li> </ul>		
<b>Conduct Expectations:</b>		
<ul style="list-style-type: none"> <li>• All federal, local, state and university guidelines will be followed for the safety and well-being of all event participants, employees, volunteers and staff.</li> </ul>		
<b>Event Staff/Volunteers: Standard volunteer guidelines</b>		
<ul style="list-style-type: none"> <li>• Standard background checks have been completed as per CSU Extension policy.</li> <li>• Approved, enrolled volunteers/volunteer appointment agreements in place.</li> <li>• Staff training (responsibilities, expectations, emergency training, safety/security cautions).</li> <li>• Review of Protection of Minors Policy (if applicable).</li> </ul>		
<b>Programming Risks:</b>		
<ul style="list-style-type: none"> <li>• There are risks associated with face-to-face programming.</li> <li>• There are some risks associated with travel.</li> <li>• There are some risks with site visits to private residences; all interactions MUST follow county public health guidelines.</li> </ul>		

\_\_\_\_\_  
Signature of Event Organizer

\_\_\_\_\_  
Date of Submission

\_\_\_\_\_  
Signature of Program Leader (i.e. 4-H, CMG)

\_\_\_\_\_  
Program Leader Name and Date

\_\_\_\_\_  
Signature of Regional Director

\_\_\_\_\_  
Regional Director Name and Date

\_\_\_\_\_  
Signature of Extension Director

\_\_\_\_\_  
Director Name and Date

**Event is approved pending the following plan alterations/additions:**