

Prairie View A&M University Event/Meeting COVID-19 Approval Request Form

Required for ALL events and meetings being planned for a PVAMU campus location.

Instructions:

Provide detailed information that responds to EACH of the questions below.

Failure to accurately complete the form could result in the event not being recommended for approval.

This form allows the appropriate office to determine whether the event should be recommended for approval, needs further review, revision or not recommended for approval.

Email the completed form to **COVIDEventReviews@pvamu.edu** no later than 7 days prior to the event. It is advised that forms be submitted as early as possible to allow for

proper planning. **Ultimate approval for ALL University events/meetings must come from the COVID Task Force or President's Office.**

<u>Event Details</u>	
Event or Meeting Title	
Point of Contact Name	
Point of Contact Information (Email & Cellphone)	
Sponsoring Department or Organization <i>If not affiliated with PVAMU, indicate the sponsoring department POC.</i>	
General Event/Meeting Description	
University Mission the Event/Meeting Supports	
<u>Time and Place</u>	
Start Date	
End Date	
Start Time	
End Time	
Location of the event or meeting	
Special comments or notes you consider vital for consideration	

Event/Meeting Information Detailed Description

<p>How does this event/meeting support one of the University's Critical Missions? Make sure to identify the mission on page 1.</p>	
<p>Who is the desired audience of this event? (Students, Employee, and/or General Public) How will they be informed of the event (media, flyer, invitation, etc.)?</p>	
<p>What is the target number of attendees for this event?</p>	
<p>Will this event require University staff be present to work, chaperone, etc. the event? If yes, how many?</p>	
<p>Will First Responders (UPD, EMT) be Required for this event? If yes, how many?</p>	
<p>Is there a plan to do a COVID-19 Symptoms Check before the event? If yes, what is the time frame?</p>	
<p>Will there be any disinfecting during or after the event? If yes, describe your plan in detail.</p>	
<p>Will the University be asked to provide PPE (masks, sanitizer, face masks, etc.) for this event? If yes, please identify the items and quantity.</p>	
<p>Will travel be involved for this event? If yes, please describe the travel plans including the type of vehicle.</p>	
<p>For the venue you have chosen, please describe its ability to prevent the recirculation or purification of the air.</p>	
<p>Based upon you target number of attendees, venue and event plan, what is the maximum amount of social distancing possible between attendees?</p>	
<p>Will food or drink be allowed in the event? If yes, explain if it will be concessions, bring your own, grab & go, or a plated meal.</p>	

For any information, determined to be vital but not addressed in these questions please share on page 1 in the special comments/notes section.

TM & EC REV. 01/20/21

Vice President, Approval Signature

Vice President, Printed/Typed Name

Date