

NMSU Youth Program Confirmation and Attestation

Part Two Registration Form - Pursuant to ARP 16.79

This form must be completed and delivered to the before the Youth Program registration process is complete. No Youth Program may commence unless and until all relevant requirements listed below are complete and this confirmation has been approved by the Vice President for Student Success.

Program Title		
Program Director (NMSU Employee)		
Program Director Contact Phone Nos.		
Program Director Email		
REQUIREMENT:		INITIALS:
*RESEARCH: IRB approval has been obtained for the collection of data about participants for research or publication.		
FACILITY SCHEDULING: Arrangements have been finalized with appropriate Facility Scheduling Authority.		
ACCIDENT INSURANCE: Accident insurance has been purchased through NMSU Environmental Health, Safety and Risk Management.		
FINANCE & CASH HANDLING: Appropriate financial and cash handling arrangements have been made.		
*COMPENSATION: HR approval has been obtained for paying Supplemental Compensation to any NMSU employee for work with the Youth Program.		
NON-DISCRIMINATION NOTIFICATION: Approved NMSU statement has been included in program promotional materials.		
*ELIGIBILITY RESTRICTION: Approval from the Office of Institutional Equity has been obtained for any Youth Program where participation is restricted based on membership in protected class (e.g. gender, race, ethnicity).		
INFORMED CONSENT: Approved informed consent forms have been obtained are incorporated into the participant registration process.		
MANDATORY TRAINING: All Youth Program staff have completed NMSU PD approved training and the Program Director has copies of all certificates as evidence of training.		
*OVER-NIGHT LODGING: The relevant Dean or Vice President has approved over-night lodging accommodations (if applicable).		
*PRIVATE VEHICLE TRANSPORTATION: A copy of each driver's license to drive and proof of insurance has been obtained.		
CRIMINAL BACKGROUND CHECK: A clearance has been obtained from HRS for each Youth Program staff indicating a criminal background check within the past 5 years.		

I hereby confirm and attest that the Youth Program requirements that I initialed above have been completed and that the Dean or Vice President with oversight of my unit has approved this Youth Program.

Program Director Signature

DATE: _____

**These items may not apply to some Youth Programs and in such cases may be marked N/A (not applicable).*