

Event Approval Request

Instructions for Application

Please completely read and review the Clackamas Community College Return to Campus Plan. Additionally:

- All programs, departments, events, and student related activities wishing to return to campus, must fill out an application at least 4 weeks prior to the date of intended event.
- For small changes in the application such as days or time communicate via email with your division dean and Events and Conference Services.
- Some of the following questions on the return to campus application may not be relevant to your request. You may say N/A or give a different description that you feel is needed and relevant information in processing this application. We are unable to create a one size fits all application but are flexible and consider what information we are able to review.
- Restrictions related to physical distancing or wearing of masks may change based on Clackamas County Health Department recommendations and changes to institutional policies.
- Requests for events or activities to reduce physical distancing from 6 feet to 3 feet, must meet the following criteria:
 - Events or trainings where it is difficult for students to do work in class or meet program outcomes with 6' distancing.
 - Events or trainings that are prohibitively expensive with 6' distancing, e.g. science labs.

For resources related to Teaching and Learning, please refer to the following links:

- Daily Self Checklist (<u>https://www.clackamas.edu/docs/default-source/general-forms-anddocuments/coronavirus-daily-self-health-checklist.pdf</u>
- Guidance for Policies (<u>https://www.clackamas.edu/docs/default-source/general-forms-and-documents/guidance-for-covid-19-policies-non-compliance.docx</u>)

All location requests are subject to change. Events and Conference Services will notify you of any change. To maintain current distancing requirements, locations will be limited to outdoor areas and indoor areas where safe distancing can take place. Number of participants will be limited depending on space used and limitations may also be adjusted by Events and Conference Services based on the current Oregon Health Authority Sector Risk Level Guidance Chart.

Events and Conference Services reserves the right to cancel any event at any time depending on the current state of the Covid pandemic as determined by current Oregon Health Authority, state and county recommendations.

*Note for Wilsonville Facility Users: This event will display as the main event title for the event on all reader boards and event listings. If you do not want your reservation to display on the reader board, check the box below:

 \square Do not post to reader board

□ THIS EVENT REQUEST IS URGENT! (Wilsonville Campus only)

1. Content/Subject and Title Event:	
2. Campus Location:	3. Expected Number of Participants
4. Contact Name and Email:	5. Date(s) and Time of Event:
6. Unlock Time and Lock Time:	7. If Event Repeats, Enter Details Here:
8. Building Name and Room Number Being Requested:	9. Billing Contact Name and Email
10. Organization Type (Nonprofit, For-profit, Private, Government, Other)	 11. What equipment are you bringing to your event, if any? Does equipment require any special licensing for commercial use? Yes No
 12. Please select any resources requested: PA System Conference Phone Materials Table Media Cart (projector, computer) Podium Catering Tables Docucam Video Conference Room Easels (you will need to bring your own paper) 	
13. FTE Collection: Thank you for choosing Clackamas Community College (CCC) for your event. Are you providing an educational training opportunity or information that can enhance your staff's ability to do their job? As a community college facility, we provide and support the ongoing training and education of our workforce We partner with the state to support and record all trainings and workshops that take place on our college campus. Outlined below is the information we need from you in order to meet these requirements and capture the important trainings being offered within Clackamas County.	
 Training/Workshop Description- Please provide a description of the content of your training/conference. What skills, policies and/or procedural updates are you providing to continue the education of your staff? Registration Information- Please complete the attached registration roster for each participant in attendance Each student will need to supply: Full name 	
 Birth date Address We do not share personal information or use participant information for any purpose other than FTE reimbursement from the State. 	
14. Based on the <u>Return to Campus Plan</u> , please check all that apply to your plan.:	
 6ft. physical distancing 3 ft. physical distancing Please explain whether part or all of your class will be using 3 ft. distancing and list the criteria number listed in the instructions that applies to your request: 	

