PROGRAM PLANNING FORM ADDENDUM
FOR SOCIAL SORORITIES & FRATERNITIES

Date Program Planning Form Submitted: ___________________

Meeting Date with OSFA: Date: __________ Time: ________ W/ _______________

Date Program Planning Form Approved: ___________________

Chapter(s) or Department(s) Sponsoring the Event: _________________________________________________________

Event Name: ________________________________________________________________________________________

Event Date: ______________ Start time: ______________ End time: __________________

Consult the following calendars to determine if the date is available and is an appropriate time for hosting this type of event
University calendar http://www.calendar.ufl.edu
Events calendar http://www.union.ufl.edu/calendar/index.asp
Florida Greek calendar http://www.greeks.ufl.edu/calendar.asp

Location: __________________ Backup Location (if needed): ____________________________________________

Individual(s) Responsible for Coordinating Event ___________________________________________________________

Name Position

Email Phone Number

Other Individual(s) Responsible for Coordinating Event _____________________________________________________

Name Position

Advisor Contact Info: ____________________________________________

Name Email Phone Number

Please provide a brief description of the event/activity that you are planning including a DETAILED Itinerary for your event as well.

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________
What is the goal of this program and how does this event further the mission/purpose of your organization, the Florida Greek community and the University of Florida?

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**PRE-EVENT PLANNING**

1. **Does your program involve any type of physical activity?**  
   - Yes  
   - No  
   - Make sure that individuals hosting the event have appropriate training to facilitate the activities  
   - A waiver form may be needed

2. **Are you serving food that is prepared by an outside vendor (e.g. Domino’s)?**  
   - Yes  
   - No  
   - Make sure that you turn in a Food form for each vendor that you are using

3. **Is your event outdoors, or can your event be affected by inclement weather?**  
   - Yes  
   - No  
   - Check ahead for weather conditions at [http://www.weather.com](http://www.weather.com)  
   - Check location ahead of time for shelter  
   - Plan for alternative rain location

4. **Is your activity an open event? (Open to the campus, public, students at other colleges or universities, and/or expected to draw over 150 participants)**  
   - Yes  
   - No  
   - Plan for crowd control - Do you need to have security present? Contact UPD Special Events – Earl Crews at 392-5444.

5. **Is there alcohol involved with your activity?**  
   - Yes  
   - No  
   - Review the [Social Events Guidelines for Sororities & Fraternities](http://www.union.ufl.edu/sac/handbook/15.asp)

6. **Are you contracting a service from a non-university entity?**  
   - Yes  
   - No  
   - Schedule a meeting with the Office of Student Activities (392-1655) to review the contract

7. **Have you received appropriate insurance verification from either the University or your inter/national organization?**  
   - Yes  
   - No

8. **Are you using a university logo or trademark in association with your activity? (i.e. t-shirts, Gator head logo)**  
   - Yes  
   - No

9. **Are you planning on posting/distributing flyers or advertising this event (e.g. flyers, Facebook)?**  
   - Yes  
   - No  
   - If yes, where are you posting/distributing this information?  
   - Please review the University of Florida's Distribution of Printed Material Policy at [http://www.union.ufl.edu/sac/handbook/15.asp](http://www.union.ufl.edu/sac/handbook/15.asp)

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**RISK MANAGEMENT**

What resources have you consulted prior to determining that you can successfully manage this event?

- Advisor  
- Resources from your Inter/National Organization  
- [Student Organization Handbook](http://www.union.ufl.edu/sac/handbook/15.asp)  
- [Social Events Guidelines for Sororities & Fraternities](http://www.union.ufl.edu/sac/handbook/15.asp)  
- Chapter Facility Policy  
- Other
Use the worksheet below to guide your documentation of the organization's approach to managing risk as well as any areas you have specific questions about.

<table>
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<tr>
<th>List Potential Risks:</th>
<th>List Specific Strategies you will use to Minimize or Eliminate Risks:</th>
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</thead>
</table>
| **Physical**  
  Physical risks can include things such as: food poisoning, injuries that may result from physical activities, injuries that may result from travel related accidents | |
| **Reputation**  
  Reputational risks are those things that may result in negative publicity for your organization, the Florida Greek community, UF, your advisor and/or the venue where you are holding event | |
| **Emotional**  
  Emotional risks are those things that can cause a participant at your event to feel alienated or negatively impact the feelings of a member or members of the UF community | |
| **Financial**  
  Financial risks are those things that negatively impact the fiscal stability of your organization and/or other organizations financially supporting your event | |
| **Facilities**  
  Facility risks are those things which may cause property damage, prevent your event from being held (bad weather, not enough space for the number of participants, lack of equipment or materials needed for the event) | |

The examples of risks given on this form are not intended to be all-inclusive; rather they are intended to act as a guide for students using this form when assessing risks associated with their activiites.

**Advisor Review:**  Advisor Name_________________________  Signature____________________  Date_______
AFTER THE EVENT - ASSESSMENT

1. Was your event a success? Why or why not?

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

2. Did you encounter any unforeseen problems? □ Yes □ No If yes, how can you better prepare in the future?

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
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3. List contact information for vendors, university staff, or others who assisted with this event.

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

4. Are you going to continue the event? □ Yes □ No
   If yes, what changes would you recommend for the following year?

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Completed on this date: ___________________ By ________________________________________________________

In order to facilitate future planning, please keep a copy of this program form and assessment in your chapter’s file and discuss it as part of officer transition.