

UConn

MINOR PROTECTION PROGRAM

STEP-BY-STEP REGISTRATION GUIDE

2016

MINORPROTECTION.UCONN.EDU



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I. OVERVIEW

PURPOSE OF THIS GUIDE

This guide is intended to provide you with step-by-step instructions for registering your activities and navigating through UConn's Minor Protection Registration Application.

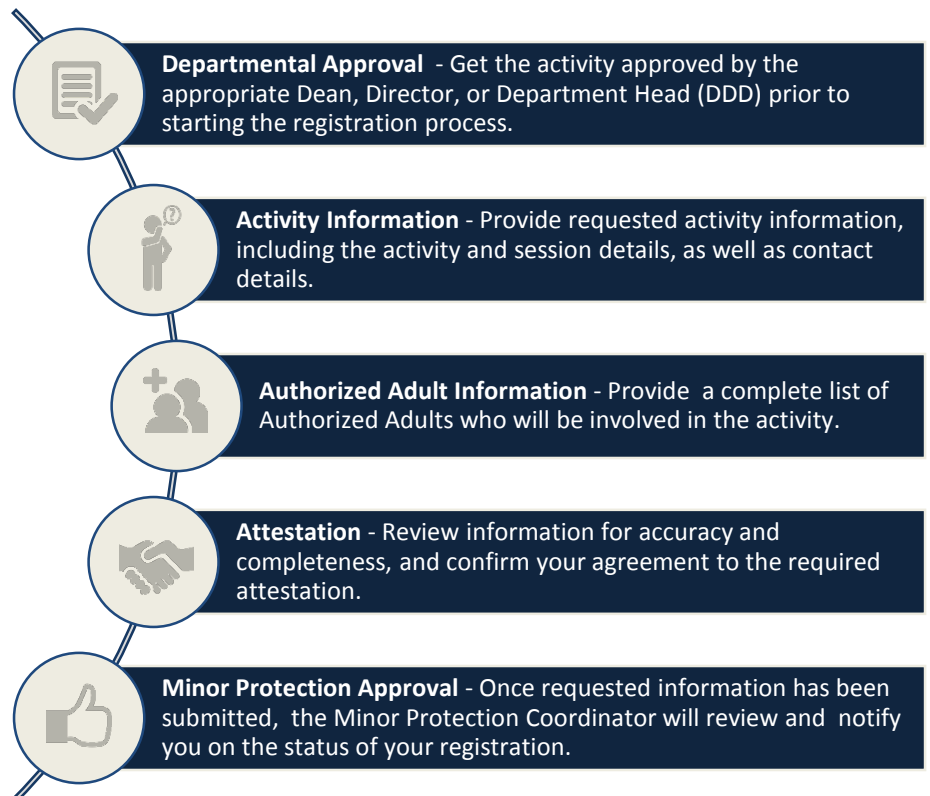
SUMMARY OF REQUIREMENT

University Sponsored activities involving minors, as defined in the University's Protection of Minors and Reporting of Child Abuse or Neglect Policy must register with the University's Minor Protection Program at least thirty (30) days prior to the start of the program or activity.

This timeline is to ensure completion of the extensive review and approval process.

REGISTRATION PROCESS

The registration process is structured into the following simple steps.



II. SUMMARY OF REQUESTED INFORMATION

ACTIVITY INFORMATION

Below is a summary of the type of information requested during the registration process.

General activity information is collected during the first phase of registration. This information Includes:

Activity Details

- Name of Activity
- Description of activity
- Sponsoring Unit
- KFS Account # (UConn Only)

Session Details

- Date(s) and Time(s)
- Min. & Max. Age of Participants
- Number of Authorized Adults and Participants
- Location(s) – Primary Day and Residential

Contact Details

- Primary Contact Information (if different from initiator)

AUTHORIZED ADULT INFORMATION

Requested Authorized Adult information includes:

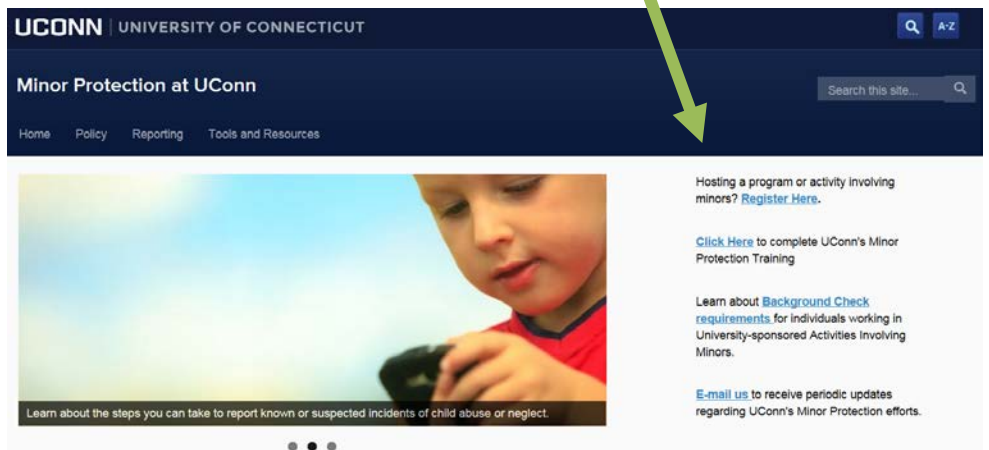
- Name of Authorized Adult
- UConn Affiliation (i.e. employee, student, or other)
- Net ID Number
- E-mail Address
- Phone Number

Additionally, the following Authorized Adult information will be entered by the Minor Protection Coordinator:

- Background Check Completion Date
- Minor Protection Training Completion Date

III. GETTING STARTED

1. Once your proposed activity has been approved by senior leadership and you have gathered the necessary information, begin the registration process by visiting the Minor Protection website at: <http://minorprotection.uconn.edu>. Navigate to the menu on the right-hand side of the home page and click “**Register Here**”



2. Find the link titled “**Click Here to Register**” and provide your NetID and Password to log into the Minor Protection Registration Application.

The image shows the login form for the Minor Protection application. It has a title 'Minor Protection' and two input fields for 'User ID' and 'Password'. Below the fields is a 'Log In' button. At the bottom, there is a note: 'Please login using your University Netid and password' and a link to 'netid.uconn.edu' for assistance. A green arrow points to the top right corner of the form area.

Please Note:
If you do not have your NetID, visit:
https://netid.uconn.edu/find_netid.php

IV. ACTIVITY INFORMATION

ACTIVITY DETAILS

3. From the tab titled "General Activity Information", select "yes" or "no" to indicate whether the proposed activity has received the appropriate senior leadership approval, and enter the e-mail address of the person who has approved the activity.

The screenshot shows the 'General Information' tab selected. It contains the following fields:

- General Information** (selected tab)
- Staff Information** (tab)
- Attestation** (tab)
- * Has the proposed activity been approved by the appropriate Dean, Director or Department Head (DDD)?**
Please indicate whether this activity has received the appropriate senior leadership approval by selecting "yes" or "no".
 Yes No
- * Email of approver**

Enter the e-mail address of the person who has approved this activity.

4. Enter the name of the proposed activity and provide a brief description or purpose of the activity.

5. Enter the name of the University unit that is sponsoring, operating, and/or supporting the proposed activity. For example, "College of Agriculture, Health and Natural Resources / Department of Animal Science".

6. Select "yes" or "no" to indicate whether this activity is being sponsored by UConn Health.

7. If the activity is sponsored by the University, provide a non-grant KFS account number for this activity. The University's Department of Human Resources will use information to bill the appropriate department for expenses associated with Background Checks.

The screenshot shows the 'Activity Details' form with the following fields and callouts:

- 4** *** Name of the Activity**
Husky Summer Art Experience
Enter the name of the proposed activity.
- 5** *** Description**
Provide a brief description or purpose of the activity.
This is a week long summer program for children ages 8 - 12. Participant learn basic skills to capture and edit amazing digital photographs.
- 5** *** Sponsoring Unit**
School of Fine Arts (Art & Art History Department)
Enter the name of the University unit that is sponsoring, operating, and/or supporting the proposed activity. For example, "College of Agriculture, Health and Natural Resources / Department of Animal Science".
- 6** *** Is this activity sponsored by UConn Health?**
Select "yes" or "no" to indicate whether this activity is being sponsored by UConn Health.
 Yes No
- 7** *** Please enter KFS account number**

Please provide the Kuali Financial System (KFS) account number for this activity. The University's Department of Human Resources will use information to bill the appropriate department for expenses associated with Background Checks. For more information contact Heather Moksness at (860) 439-6328 or heather.moksness@uconn.edu.

IV. ACTIVITY INFORMATION (CONTINUED)

SESSION DETAILS

8. Click the green "+" symbol to add the following details for each session.

* Session Details – Please provide requested information for each session.
Click the green "+" symbol below to add details related to the dates, locations, age ranges, and number of adults and minors for each session.

Session	Start Date and Time	End Date and Time	Number of Participating Minors	Number of Authorized Adults	Minimum Age	Maximum Age	Primary Location for Day Activities	Overnight Location (if applicable)
There are no submissions.								

There are no submissions.

9. Enter the minimum / maximum age a participant can be to be allowed to participate in the activity.

10. Type in or select from the calendar the date this activity will begin and end. If typing, use the following format: mm/dd/yyyy

Add Entry

Session
1

* Minimum Age
8
Enter the youngest age a participant can be to be allowed to participate in the activity.

* Maximum Age
12
Enter the oldest age a participant can be to be allowed to participate in the activity.

* Start Date and Time
Date: [Calendar] Time: [Time Picker]
When this activity will begin. If typing, use the following format: mm/dd/yyyy

Buttons: Add, Cancel

Add Entry

30
Type in the number of minors expected to participate in this activity.

* Number of Authorized Adults
6
Type in the number of Authorized Adults that will participate in this activity. Please Note: An Authorized Adult is defined as "A University employee, student, or volunteer (paid or unpaid) who has (1) successfully passed a Background Screening, (2) completed the University minor's protection training within the last year, and (3) has been registered with the University's Minor Protection Coordinator."

* Primary Location for Day Activities
Fine Arts Complex, Storrs Campus. Department of Art + Art History (B)
Please describe the primary location where activities will take place. Include: campus/building or street address for off-campus locations.

Overnight Location (if applicable)
N/A
If your activity requires overnight lodging, please describe the location's address, activities, etc.

Buttons: Add, Cancel

11. Type in the number of minors and Authorized Adults expected to participate in this activity.

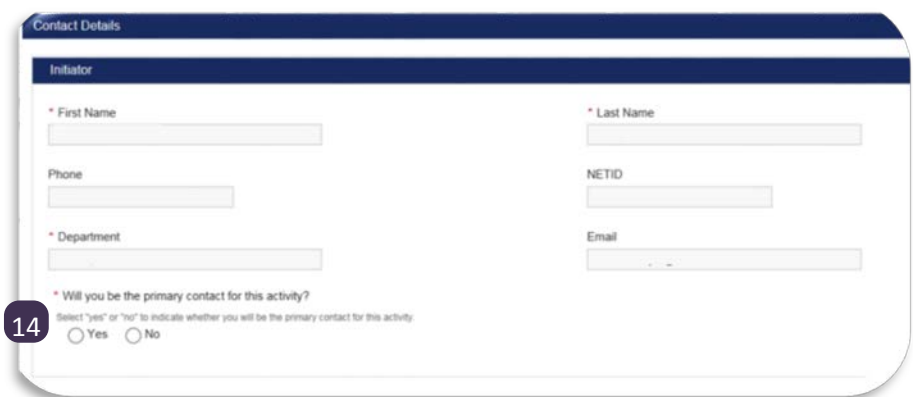
12. Provide the primary location of day and overnight activities. Include: campus / building or street address for off-campus locations.

IV. ACTIVITY INFORMATION (CONTINUED)

CONTACT DETAILS

13. If the activity has a web site, please enter the complete URL. For example: <http://minorprotection.uconn.edu/>

14. Your information will be displayed automatically under the section titled "Initiator". Select "yes" or "no" to indicate whether you will also be the primary contact for this activity.



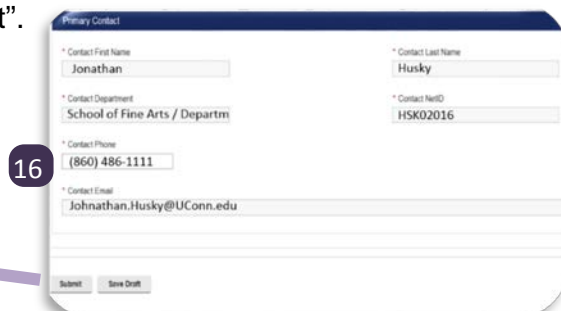
The screenshot shows the 'Contact Details' form with the 'Initiator' section. It contains several input fields: First Name, Last Name, Phone, NETID, Department, and Email. At the bottom, there is a question: '* Will you be the primary contact for this activity?' with radio buttons for 'Yes' and 'No'. A callout box with the number 14 points to the 'Yes' radio button.

15. If the initiator is not the primary contact of this activity, enter the name of the person who will be the primary contact, click "search", and select the appropriate person.



The screenshot shows the 'Search' form. It includes instructions: '1. Enter First and Last Name', '2. Click on Search to populate the Select a person list.', and '3. Select a person from the list to fill in the Contact information.' Below the instructions are input fields for 'First Name' and 'Last Name', a 'Search' button, and a 'Select a person' dropdown menu. A callout box with the number 15 points to the 'Search' button.

16. Review the Primary Contact information, enter the appropriate phone number, and click "submit". Upon submitting, a link to the form will be emailed to you and you can proceed to the next phase by clicking "Next".



The screenshot shows the 'Primary Contact' form. It contains input fields for Contact First Name (Jonathan), Contact Last Name (Husky), Contact Department (School of Fine Arts / Departm), Contact Phone ((860) 486-1111), and Contact Email (Johnathan.Husky@UConn.edu). There are also fields for Contact NetID (HSK02016) and a 'Contact URL' field. At the bottom, there are 'Submit' and 'Save Draft' buttons. A callout box with the number 16 points to the 'Submit' button.

The requested activity information has been successfully submitted. A link to this form has been sent to your email. Please proceed to the next page to provide requested Authorized Adult information. This information must be provided at least thirty (30) days prior to the start of the activity.

OK

IV. AUTHORIZED ADULT INFORMATION

DATA ENTRY OPTIONS

17. Navigate to the tab titled “Staff Information” and indicate whether you will be entering the requested Authorized Adult information manually (via table) or via an attachment (excel spreadsheet).

The screenshot shows the 'Staff Information' tab with three options: 'Manual Information', 'Staff Information', and 'Attestation'. Under 'Staff Information', there are two radio buttons: 'Attachment' (unselected) and 'Table' (selected). Below the radio buttons, there are instructions: 'To Add a new entry click on the + symbol.', 'Double click an entry to edit or first click on the entry to highlight it and then click the pencil.', and 'To delete an entry, click on the entry to highlight it and then click on the X.' Below these instructions is a table with the following columns: 'Authorized Adult First Name', 'Authorized Adult Last Name', 'UConn Primary Affiliation', 'NETID', 'Authorized Adult Email', 'Authorized Adult Phone Number', 'Background Check Clearance Date', 'Training C-ESI Table Properties Inspection Date', and 'Select Sessions for the Adult'. The table is currently empty, and a message at the bottom says 'There are no submissions'.

MANUAL ENTRY

18. If entering manually, select “Table” and click the add icon “+” to add authorized adults. Assign adults to a specific session, provide the requested information (excluding training and background check dates, which will be entered by the Minor Protection Coordinator), and click “Add”.

The screenshot shows the 'Add Entry' form. At the top, it says 'Select Sessions for the Adult' with a checked box for '1 from 07-23-2016, 00:00 to 07-30-2016, 00:00'. Below this are several input fields: 'Authorized Adult First Name' (Jane), 'Authorized Adult Last Name' (Doe), 'NETID' (Jan02002), 'UConn Primary Affiliation' (Employee selected, Student and Other unselected), 'Authorized Adult Email' (Jane.doe@uconn.edu), and 'Authorized Adult Phone Number' (with a mask). At the bottom right are 'Add' and 'Cancel' buttons.

FILE UPLOADS

19. If uploading information, select “Attachment” and click on the hyperlink titled “link to Excel template file”. Complete the provided excel template file, save the updated file on your computer, and use the browse feature to find and attach the file to the form.

The screenshot shows the 'Attachment' option selected. Below the radio buttons, there is a text box with the instruction: 'To submit requested Authorized Adult information using the template file included below please click here [link to Excel template file](#)'. Below this is a section for 'Upload a spreadsheet' with a 'Select File:' label and a 'Browse' button. A red error message below the file selection area says 'Attachment is required'. At the bottom is a 'Save Progress' button.

20. Once all Adults have been entered, navigate to the next screen by clicking “Next” or selecting the tab titled “Attestation”.

VI. FINALIZING THE REGISTRATION PROCESS

ATTESTATION

21. Once you have reviewed your registration form for accuracy and completeness, confirm your agreement to the required attestation, and submit your form for review/approval.

The screenshot shows a web form with three tabs: "General Information", "Staff Information", and "Attestation". The "Attestation" tab is active. Below the tabs, there is a heading: "Prior to finalizing the registration process, please take a moment to review your registration form and confirm your agreement to adhere to the following:". Below this heading are five bullet points, each with a red dot:

- **University Policy** – I confirm that I and all Authorized Adults involved in activities have reviewed, fully understood, and agreed to abide by UConn's Protection of Minors and Reporting of Child Abuse policy in advance of working with minors.
- **Staff Background Checks** – I understand that each Authorized Adult must successfully complete a criminal background check, and I attest that each Authorized Adult has been cleared to work with minors in advance of their involvement in activities.
- **Staff Training** – I understand that each Authorized Adult must successfully complete UConn's Minor Protection Training, and I attest that each Authorized Adult has met this requirement within the past 12 months and in advance of their involvement in activities.
- **Supervision of Minors** – I understand that University-sponsored activities involving minors must ensure adequate levels of supervision at all times and eliminate one-on-one interaction, and I attest that activities have been coordinated in way that meets this expectation.
- **Advance Consents** – I understand that University activities involving minors must have procedures to ensure that advance parental consent is obtained, and I attest that this expectation has been met prior to permitting a minors to engage in activities.

Below the bullet points is a line of text: "By checking this box, I attest that the information on this form is accurate and complete, and agree to comply with applicable University requirements (including those referenced above)."

Underneath this text is a checkbox, a "Name of Attestor" label, and a text input field. At the bottom left of the form is a "Save Progress" button.

MINOR PROTECTION APPROVAL

22. Once all requested information has been submitted, the form will be reviewed by the Minor Protection Coordinator and you will be notified on the status of your registration.

CONTACT US

For further assistance with the registration process please visit: <http://minorprotection.uconn.edu> or contact the Minor Protection Coordinator at:

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