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REGISTRATION OF UC	OWN ACTIVITIES INVOLVING MINORS			
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Second Internation Teel Information Atlanticies	Current Stage			
2 Car	Start 🗸			
Activity Design				
• Sector of the Article				
Los to servicios assessinguisto.	General Information	Staff Information	Attestation	
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Calcular in the phase more specifies related in the activities	<ul> <li>Has the proposed activity be</li> </ul>	en approved by the appro	priate Dean, Director or Departr	nent Head (DDD)?
Ratest Pile Brogen.	Please indicate whether this activity h	as received the appropriate sen	ior leadership approval by selecting "yes	s' or "no".
<ul> <li>Approximate guided and a specific specific specific specific strategy of proposition in a first strategy of the s</li></ul>	⊖Yes ⊖No			
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* (systems) Auth, Conglands and Bhills	tine snar arhjalfarinn afa		IMPRE	SSIONS 35
<ul> <li>Bit you for the primary contact for the activity?</li> <li>Inter ( you're into a contact, you do not access you do not access to the activity.</li> <li>You &gt;&gt; No</li> </ul>			A I THE KL	0010140 33

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Tangible Examples	
General Information       Staff Information       Attestation         * Has the proposed activity been approved by the appropriate Dean, Director or Department Head (DDD)?         Please indicate whether this activity has received the appropriate serior leadership approval by selecting 'yer' or 'no'.         Yes       No         Activity Detail         * Name of the Activity WHAT?         Drive for any target or approved the activity.         * Description         * Description         WHY?	bur
"Session Distais – Peaks provide requested information for each session.     WHERE?     Clas de general "select atom reads and the set of the date, such atom of the set of	ai ACADEMIC



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Tangible Examples	
General Information         Staff Information         Attestation           * Has the proposed activity been approved by the appropriate Dean, Director or Department Head (DDD)?           "Hease indicate whether this activity has received the appropriate Senior leadership approval by selecting "yes" or "no".           Yes         No           Activity Details           "Answed the Activity WHAT?           Unret for the Activity WHAT?           The for the activity WHAT?           The for the Activity WHAT?           WHY?	Ir
Upticad a fib to share more specific; related to the activities Select 7 iie  * Sponsoring Lite  WHEO? Contract and the to bismary, and the sponsore, several and separate activity. For scales, "College of Agriculture, Issuelt and Islams Researce activity To the activity agriculture to bismary (Decon Health 7) Sector Series and Multicol Sector Researce to the gradementary to College in Agriculture, Issuelt and Islams Researce activity	Activity Details
Ves No     Session Details - Phase provide regression for each ressor.     Where each ressor we have a data model with a data. Number of Numb	ai ACADEMIC

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	Examples	<u> </u>	
Contact Details Initiator			
First Name     Phone     Department	THE PERSON <u>REGISTERING</u> THE ACTIVITY	* Last Name NETID Email	
* Will you be the primary contact for this activity? Select "yes" or "to" to indicate whether you will be the premary certact to Or Yes" No Primary Contact	for this activity.		
* Contact First Name * Contact Department	THE PERSON <u>OVERSEEING</u> THE ACTIVITY	* Contact Last Name * Contact NetD	
* Contact Phone * Contact Email			
			ACADEMIC IMPRESSIONS 38

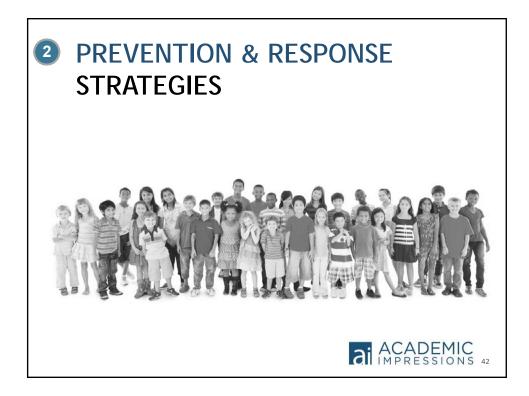


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Tangib	le Examples	5	_
Initiator			
* First Name	THE PERSON	* Last Name	
Phone	REGISTERING	NETID	
* Department		Email	
* Will you be the primary contact for this activity? Select "yes" or "xo" to indicate whether you will be the primary O Yes O No	y contact for thes activity.		
Primary Contact			Primary
* Contact First Name	THE PERSON	* Contact Last Name	Primary Contact
* Contact Department	OVERSEEING THE ACTIVITY	* Contact NetID	
* Contact Phone			
* Contact Email			ai ACADEMIC IMPRESSIONS 39

Authorized Adult First Name	Authorized Adult Last Name	UConn Primary Affiliation	NETID	Authorized Adult Email	Authorized Adult Phone Number	Background Check Clearance Date	Training Completion Date	Select Sessions for the Adult
Omar	Andujar	Regular Payroll Employee	ABC123	Omar.andujar@uconn.edu	860-486-5682	12/1/2015	7/1/2016	1, 4
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* Authorized /	Adults							
Authorized Adult First Name	Authorized Adult Last Name	UConn Primary Affiliation	NETID	Authorized Adult Email	Authorized Adult Phone Number	Background Check Clearance Date	Training Completion Date	Select Sessions for the Adult
Omar	Andujar	Regular Payroll Employee	ABC123	Omar.andujar@uconn.edu	860-486-5682	12/1/2015	7/1/2016	1, 4
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	Hiring
	Planning and Implementation
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