

SPECIAL EVENT PROPOSAL

This form is to be used for requests to bring a special event or a special activity to a Department of Corrections facility. The nature of this event requires special approval (i.e., large events; events where donations would be required; where food is requested to be brought in for the event; events that require special arrangements by the facility such as extra supervision by staff and/or volunteers or use of property not normally dedicated for that purpose).

It is the responsibility of the staff or the volunteer requesting a special event to submit this "Special Event Proposal" form to the volunteer coordinator at least 90 days in advance. The volunteer coordinator will forward the request to the facility administration within one week of receipt of the request.

The facility/district head will approve or deny the request at least 60 days prior to the event.

Date Submitted: _____

Group or Organization Submitting Request: _____

Contact Person(s): _____

Date and Time of Purposed Event: _____

Alternate date if applicable: _____

Type of Event: _____

PRIMARY PURPOSE (What is the reason you want to conduct this activity?):

GIVE A BRIEF DESCRIPTION OF THE PROPOSED ACTIVITY AND ANY BACKGROUND INFORMATION (i.e., schedule of activities). Attach page if needed. Has this been an annual event? If so, was it successful? What problems if any were encountered?

WHAT SPECIFIC MATERIALS, SUPPLIES OR RESOURCES WILL BE REQUIRED?
(i.e., chairs, music equipment, etc.)

WHERE WILL THIS ACTIVITY BE HELD?

HOW MANY INMATES ARE NEEDED TO ASSIST IN PREPARATION AND CONDUCTING THIS ACTIVITY?

SPECIFIC JOB DUTIES FOR EACH INMATE REQUESTED: (Attach additional page if necessary)

ESTIMATED NUMBER OF VOLUNTEERS THAT WILL PARTICIPATE: _____

ESTIMATED NUMBER OF SPECIAL GUESTS THAT WILL PARTICIPATE: _____

*Required information on volunteers and outside guests must be turned into the facility volunteer coordinator at least two weeks in advance

TOTAL NUMBER OF INMATES (approx.) THIS ACTIVITY WILL BENEFIT: _____

Food Donations at Programs

Volunteer groups are allowed to bring food into correctional facilities under the following conditions:

- a. Food must be either pre-packaged or professionally prepared under the supervision of someone with a food handler's license. A copy of the food handler's license must be submitted with this form. Volunteers are responsible to deliver and serve the food at the facility in an appropriate time frame and manner.
- b. All requests for the use of food will be included in the "Special Events Proposal."

No special accommodations will be made for religious feasts and festive meals except as follows:

- a. Where program space and security level allows, inmates who are celebrating a recognized religious feast or festive meal will be able to eat their meal together as a faith community. The food will be the same as that which is served to the rest of the general population for that meal.
- b. Foods that have a verifiable religious significance may be donated by an outside religious organization or purchased by the inmate from an authorized vendor for ceremonial meals. Foods purchased by an individual inmate are for that inmate's use only. Foods purchased by a faith group may be shared among the group. Religious significance must be verified by the faith group's sacred text and outside religious authority.
- c. All donations or purchases must be arranged through the facility chaplain and approved by the facility head or their designee.
- d. Food items must be either pre-packaged or professionally prepared under the supervision of someone with a food handler's license.

All food donations and purchases are subject to search prior to distribution to the inmate faith community.

SPECIFIC FOODS WHICH YOU WISH TO DONATE FOR THIS EVENT AND WHERE IT WILL BE PURCHASED OR WHO WILL PREPARE: (Attach an additional information page if necessary and if prepared, not prepackaged, a copy of the preparer's food handler's license)

STAFF USE ONLY

THIS EVENT WILL BE SUPERVISED BY ☐ VOLUNTEERS
☐ STAFF
☐ BOTH STAFF AND VOLUNTEERS

HOW WILL THIS EVENT BE SUPERVISED? (Be specific)

WILL THIS EVENT REQUIRE ADDITIONAL STAFF TO PROCESS VOLUNTEERS, SPECIAL GUESTS, OR ITEMS BROUGHT INTO THE FACILITY? ☐ YES ☐ NO

WILL SUPERVISION OR PROCESSING FOR THIS EVENT REQUIRE OVERTIME?
☐ YES ☐ NO

IF YES, ESTIMATE HOW MUCH OVERTIME WILL BE REQUIRED: _____

**ANY EVENT REQUIRING OVERTIME MUST BE REVIEWED BY THE APPROPRIATE
REGIONAL DIRECTOR**

ARE THERE ANY ADDITIONAL SECURITY REQUIREMENTS FOR THIS ACTIVITY?

DESCRIBE POTENTIAL PROBLEMS AND SOLUTIONS TO SUCCESSFULLY COMPLETE THIS ACTIVITY:

*******REVIEW PROCESS*******

Proposal must be reviewed & approved by all involved supervisors:

Chaplain/Volunteer Coordinator Comments: _____

Recommend: ☐ Approval / ☐ Denial

Chaplain/Volunteer Coordinator Signature Date _____

Security Staff Comments: _____

Recommend: ☐ Approval / ☐ Denial

Security Staff Signature Date _____

Deputy Warden/Assistant Facility Head Comments: _____

Recommend: ☐ Approval / ☐ Denial

Deputy Warden/Assistant Facility Head Signature Date _____

Warden/Facility Head – Comments: _____

☐ Approved / ☐ Denied

Regional Director Review is required by OP-090211 if this special event involves one of the following (check all that apply and forward to the appropriate regional director with your recommendation):

- ☐ Volunteers or special guests in athletic competition with inmates
- ☐ Vehicles inside the facility during the event
- ☐ Events not sponsored by ODOC volunteers or staff

Recommend: ☐ Approval / ☐ Denial

Warden/Facility Head Signature Date _____

Regional Director Review (if required by OP-090211)

Regional Director – Comments: _____

Recommend: ☐ Approval / ☐ Denial

Regional Director Signature

Date

(R 1/17)