



Event Risk Manager: UJ

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UNIVERSITY OF JOHANNESBURG (UJ)

EVENT PRE - EVENT RISK REQUEST ASSESSMENT FORM

(For small to medium sized university events)

UJ EVENT SAFETY AND SECURITY PLANNING

As part of any good planning process hazards should be identified and risks assessed and controlled to minimize the potential for injury or harm and University's reputational risk. Events vary in size, nature and type, but all events require assessment, control and monitoring of risks.

Attached is an event checklist produced by the UJ Event Risk Management which provides guidance in the type of risk assessment procedure that should be undertaken before an event takes place.

UJ Event Risk SOPS require that before an event is held on UJ Premises, relevant permits and licenses are obtained and that a pre request risk assessment form (attached below) is completed and forwarded to the Event Risk Manager at least 4 weeks before the date of the event. If the need arises, the Risk Manager together with the ELG member responsible will convene a meeting of stakeholders to discuss the proposed event risk planning.

PROPOSED EVENT CHECKLIST

Event Title and the Name of the Event Owner (ELG Member)

<p>Comments:</p> <p>Event Title:.....</p> <p>Title & Full Name of the ELG Member:.....</p> <p>.....</p>
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Venue to host your event (Has it been Booked and Approved): YES or NO

<p>Comments:</p> <p>Name of the venue approved by the CVF or Campus Director:.....</p> <p>.....</p> <p>Campus where the event is to be hosted:.....</p> <p>Exact date when the venue was confirmed:.....</p>

Proposed Event Date:

<p>Comments:</p> <p>Exact Date of the proposed event:.....</p> <p>Date on which the proposed event request was submitted to the <i>Event Risk Manager</i> for risk verification:</p> <p>.....</p>

Exact Beginning and Ending Times

Comments:

Beginning time including preparation time:.....

Ending time:.....

Crowd Size and Composition

Comments:

Number of people/guests expected:..... **(No + -)**

Crowd composition: (e.g. Children, Elderly, Professionals, Political, Church Congregation, etc.,)
.....

Campus where the event is to be hosted:.....

The Following Attendees have to be confirmed

Comments:

Indicate if your event will be hosting the following: (Government Minister, High Profile Individual, Member of Parliament, High Profile Musician/Comedian, Political Leader or International Guest/s: **(Please specify and if possible provide NAMES)**):

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Catering Arrangement (Occupational Health Services to be contacted for this)

Comments:

Will there be any Catering involved:.....?

Provide Name of the Caterer if known:.....

NB: Certificate of Acceptability (CoA) for Caterer will be required

Parking Arrangements: (Protection Services to be contacted for this)

Comments:

Any parking arrangement required:.....

.....

Security and Cash Handling Arrangements - site perimeter security, entry/ticketing arrangements. Potential risk of theft of cash, valuables and equipment must be considered. The use of a professional security company may be required for larger events. (**No tickets to be sold on the venue of event. Prior marketing should be done**)

Comments:

Have you made arrangements with Protection Services for a full security plan for your event:

.....?

NB: You may be required to pay for your event extra security

Provision of alcohol

Comments:

If so, have you obtained relevant liquor license:.....?
.....

Provision of facilities - toilets, washing facilities, water supplies, provision for disposal of waste water, rubbish bins (***Auxiliary Services***)

Comments:

Have you made arrangements with Auxiliary Services for venue cleaning for your event:
.....?

NB: You may be required to pay for extra cleaning on your event

Waste Management - waste collection during setting up, during and after the event.

Comments:

Have you made arrangements for a waste management plan with Occupational Safety or Auxiliary Services:.....?

Special needs groups: Consider the types of attendees such as children, elderly persons and the disabled - are there particular arrangements that need to be made, e.g. for ramps?

Comments:

Have you made special arrangements for children, elderly persons and the people with disability:.....?

Technical Requirements: (Electrical and Plumbing issues during your event)

Comments:

Have you made arrangements with Technical Services regarding the following:

Plumber in case of plumbing requirement during your event:.....?

Electrician in case of electrical problem during your event:.....?

NB: You may be required to pay for these services depending on the time of your event.

Temporal Structure

Comments:

Are any temporary structures going to be erected:.....?

If the answer is YES, above. Have you appointed a competent person.....?

NB: An Engineering Certificate for temporal structure erected may be required depending on the temporal structure erected.

Contingency plan

Comments:

What alternative arrangements have you made in case of a bad weather during your event:

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The above proposed event has been confirmed by the ELG Member as the Event Owner subject that it meets all UJ Event Risk requirements

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Name of the Event Organizer (ELG Member)

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Signature

Once this form is completed and signed by the ELG member, it must be forwarded to the Event Risk Manager on Email Address: conradvdh@uj.ac.za as a confirmation of an event request assessment and possible signing off.