



## HQ Alcohol Education and Risk Mitigation Training Proof of Completion Fall 2023

At the University of Arizona, we want our fraternity and sorority members to have a fun, memorable, and safe experience. Through training, education, and partnership with chapter headquarters, we provide the necessary tools chapters need to create a safe, healthy, and responsible environment that allows all members to be successful in their daily endeavors.

For social event paperwork to be submitted and events to be registered certain organizations must have their members complete an alcohol education and risk mitigation program for members facilitated by headquarters personnel, in addition to all other policies and educational requirements being met.

University of Arizona Social Events Policy - <https://greek.arizona.edu/fsp/social-events-policy>

This form must be completed by headquarters personnel and emailed to [GreerVinall@arizona.edu](mailto:GreerVinall@arizona.edu) and CC [ArizonaEWA@gmail.com](mailto:ArizonaEWA@gmail.com). **This form will not be accepted if it is emailed by a student.** Questions should be sent directly to Greer Vinall, Assistant Director Fraternity and Sorority Programs.

Fraternity/Sorority Name: \_\_\_\_\_

### Headquarters Staff Member Information

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Facilitator Information

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Chapter Member who Coordinated Training

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

When was the training held (date and time)?

Was the training held in-person or live via zoom?

- In-Person
  - o Location:
- Live Via Zoom
- Other
  - o Please describe:

If the training was held on Zoom, how did you maintain member engagement and attention?

Please select the option that best describes who attended:

- New member class only
- Entire chapter
- New member class and potential “bigs”
- Other (please describe): \_\_\_\_\_

How many members attended?

What percentage of the chapter was in attendance?

- < 25%
- 26 – 50%
- 51 – 65 %
- 66 – 80 %
- 81 – 90 %
- 91 – 99 %
- 100 %

What officers (executive and general/board) were in attendance?

Please select the topics that were covered in your training:

- Chapter event/risk management policies and procedures
- Alcohol use and signs of overconsumption
- Drug use and signs of overdose
- Bystander intervention
- Sexual assault prevention and reporting
- Being an effective non-drinking event monitor
- How to get help and respond in different scenarios
- Other (please list):
  
- Other (please list):
  
- Other (please list):

Please provide a description of the training.

What content was covered, were members engaged, what (if any) activities were done, what was audience engagement like, were any assessments given, etc.

By signing below, I certify all information on this form is true and correct.

HQ Staff Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Facilitator Signature: \_\_\_\_\_ Date: \_\_\_\_\_