



RESPONSE DOCUMENT

Campus Host for 2019 Certification Courses

SUBMISSION INSTRUCTIONS

Please submit completed document to megan@nabita.org.

Name of prospective host institution: _____

City: _____ State: _____

A. Dedicated Contact

Response: Outline contact information for the individuals who will serve as NaBITA's point of contact for all planning purposes and inquiries leading up to and during the training event. These individuals should be available for regular calls and/or emails with NaBITA staff to discuss logistics, ask questions, etc.

Contact 1

- Name: _____
- Professional title: _____
- Department: _____
- Email address: _____
- Phone number: _____

Contact 2

- Name: _____
- Professional title: _____
- Department: _____
- Email address: _____
- Phone number: _____

Please confirm that these individuals (to the best of their abilities) will remain in regular contact with NaBITA throughout the planning process and with attendees during days of training:

_____ Yes

_____ No

At the four-month mark from the start of your event, Megan Birster will set up a monthly call. At the two-month mark, a bi-weekly call will be scheduled. During the last three weeks, leading up to your event, a weekly call will be scheduled. These calls should take no longer than ten minutes.

Additional comments:

B. Dates for Training and Course Selection

- I confirm ability to adhere to the 8:30AM-5:00PM schedule:

_____ Yes

_____ No

If no, please provide an explanation:

- List five preferred date sequences when your campus can host, in priority order:

1. _____
2. _____
3. _____
4. _____
5. _____

- List three course preferences in priority order:

1. _____
2. _____
3. _____

C. Space Requirements

Outline the name of the training facility or facilities you intend to reserve based on the above outlined space requirements. Also include in your response any maps, floor plans, or diagrams of the reserved facility that will be helpful to understand the room set-up.

- Campus address: _____
- Training facility address: _____
- Maximum capacity of facility: _____
- Link to campus map: _____
- Room style/anticipated set up: _____

Additional comments:

D. Technology

Please outline the audio/visual set up of training facility:

I confirm my campus will be able to provide technology tools and qualified assistance throughout the training event:

_____ Yes

_____ No

Wireless Internet will be provided to attendees:

_____ Yes

_____ No

Please note the network and password (if applicable):

E. Catering

List location of continental breakfast and afternoon snack. Please provide links or lists of on-site and local dining services within walking distance to your campus available to attendees during training dates.

F. Outreach and Recruitment

Outline your plan for outreach and recruitment. Also include a list of potential outreach media (association listservs, local colleagues, etc.).

G. Registration

No response required.

H. Certification

No response required.

I. Transportation & Lodging

Please provide the following information regarding local transportation and lodging, including any websites that source this information:

- **Transportation**

1. Airport(s):
 - Address(es): _____
 - Approximate distance(s) from campus: _____
 - Ground transportation options: _____

2. Train station(s):
 - Address(es): _____
 - Approximate distance(s) from campus: _____
 - Ground transportation options: _____

- **Hotel Lodging: Please provide at least two local hotels within walking or short driving distance to campus.**

1. Address: _____
Approximate distance(s) to campus: _____
Availability over proposed dates? _____ Yes _____ No
Cost per night: _____
Parking information: _____
Amenities (wireless internet, breakfast, parking, etc.): _____

- Discounted room block rates are encouraged. If you've negotiated a discounted rate, please provide:
 - Rate: \$ _____
 - Hotel point of contact: _____

 - Code/info needed for making reservations: _____

2. Address: _____
Approximate distance(s) to campus: _____
Availability over proposed dates? _____ Yes _____ No
Cost per night: _____
Parking information: _____
Amenities (wireless internet, breakfast, parking, etc.): _____

- Discounted room block rates are encouraged. If you've negotiated a discounted rate, please provide:

- Rate: \$ _____
- Hotel point of contact: _____

- Code/info needed for making reservations: _____

- **On-Campus Lodging (*not required*):** Due to the current budget crisis many schools are facing, NaBITA would like to explore the option of an on-campus alternative to hotel accommodations, when possible. Please provide information on available residence hall rooms that can be made available to attendees for no more than \$50 per night, up to 2 nights. This information should include:

Proximity to training space, parking information, whether non-NaBITA attendees (such as students, other conference attendees, or summer campers) will be housed in the building at the same time, amenities (wireless internet, suite-style vs. communal restrooms, etc.), dining services, linens and towels

J. Parking

Outline your plan to provide free daytime parking to all attendees and appropriate signage from parking locations to the training facility. *If parking is a concern, please contact megan@nabita.org to discuss further.*

- Link to annotated map denoting parking lot and training facility location:

- Link to parking permit to provide to attendees (if necessary):

K. Accommodations for Attendees with Disabilities or Special Needs

Outline services provided by your Office of Disability or equivalent office, including American Sign Language (ASL) interpreter services and wheelchair access to training and dining facilities, whether a dedicated space is available or can be reserved as a lactation room, and if the training facility has gender neutral restrooms. NaBITA often receives requests for ASL interpreters for deaf or hearing-impaired attendees and therefore requests specific information on the potential host's ability to provide or make arrangements to provide licensed interpreters in the event a hearing-impaired participant(s) registers.

L. Certificate of Insurance

Do you require a copy of The NCHERM Group’s certification of insurance (COI) on file in advance of hosting the event?

_____ Yes

_____ No

If you do require a COI, please also confirm whether your institution must be listed as an additional insured during the dates of the training event, and what information (name of additional insured and address) should be included on the COI.

M. Benefit to Hosts

Outline the anticipated number of attendees from your institution.

If you plan to send more than 10 attendees from your institution, they may register at a discounted rate of \$250 per person. Please contact your NaBITA event coordinator or megan@nabita.org to register additional attendees.

N. Event Cancellation

Please sign here to confirm that you acknowledge and understand the terms of the event cancellation and faculty change clause in the RFP.

X _____

Please direct all questions or concerns to megan@nabita.org.