



General Information & Guidelines

The health and safety of students, employees, vendors, and the general public visiting the campus is a college priority.

A proactive risk assessment process has been developed to align with MCCCCD's Risk Management Program. Additional MCCCCD risk management information can be found at:

<https://maricopa.sharepoint.com/sites/DO/business/rm/Pages/default.aspx>

- **Risk Assessment Purpose:** The purpose of the risk assessment is to identify potential risk and effectively provide ways to protect against possible harm and/or loss
- **Risk Management:** To manage potential risk, all services are assumed to have a risk potential and require assessment
- **Risk Mitigation:** To mitigate potential risk, appropriate prevention strategies are identified and implemented

Levels of Risk

- Level 1 – Risk is minimal
- Level 2 – Risk is mid-level
- Level 3 – Risk is high
- Level 4 – Risk is extreme

Action Required

No certificate of Insurance or other risk prevention actions are required

Certificate of Insurance may be required with other possible risk prevention actions

Certificate of Insurance required with other risk prevention actions required

Services not recommended

Risk Assessment Instructions

Requester

Complete this form before submitting a requisition if you are requesting services on campus which you believe to be low-risk. Please be sure to allow sufficient lead time for the form to be reviewed. If the requested services appear to present a risk that would require proof of insurance, you may skip this step and proceed to request the certificate from the vendor. This form is also not required if an approved and current Certificate of Insurance is already on file.

Fill out questions 1-7 on the 2nd page of this form.

Save a copy of the PDF and send to dl-fiscal@paradisevalley.edu for review.

If approved with **Level 1** risk, attach the form to the requisition for services.

If approved with **Level 2 or higher** risk, the vendor will need to provide a Certificate of Insurance which meets MCCCCD requirements. The certificate will be attached to the requisition.

PVCC Risk Assessment Form

1) Today's Date: _____

2) Person submitting request: _____

3) Vendor's name: _____

4) Timeframe for services: _____

5) Summary of services (i.e. Speaker, Musician, Set Designer): _____

6) Detailed description of services **(Be thorough, include any labor to be performed by or equipment that will be handled by the vendor):**

7) Signature: _____

Action Items To Proceed With Services

This section to be filled out by Business Services only

Level of Risk: _____

The following requirements must be satisfied before services can proceed:

Certificate of Insurance required

Professional Liability coverage required

Services Contract required

Professional Services Contract required

Food Handler's Certificate required

Other

Not recommended for services to proceed

Issuance of Purchase Order

Director of College Business Services: _____

Signature: _____

Date: _____