



Project Safe Guard Implementation Checklist State, Territory, District of Columbia (S/T/DC) Form

Instructions: Please review the list of requirements and complete and return this form within **10 business days** to confirm your training(s). If you have any questions, please contact csts-ng-psg-team-ggg@usuhs.edu.

If there are any concerns with the following requirements, please contact us:

- We will have 2-8 of our staff members attend the training.
- We will arrive 1-hour prior to the scheduled training time for set-up.
- We plan to contact the POC you provided when we arrive at the training site.
- Please let us know if you cannot transport the lock boxes and printed materials to the training room before the training.
- We need a projector and HDMI connector cable to present the training slides from our laptop. We will also share our slides with the POC if they can be projected from an existing computer set up in the training room. A microphone would also be helpful if it's a very large room.
- Please plan for the POC (or other representative) to attend the complete training in the event we require assistance with technology or setup.
- We ask that the POC (or other representative) send a reminder email to attendees to complete the 1-month follow-up questionnaire after the training.
- If there are S/T/DC-level data you would like to provide as a supplement to the training, please let us know.

For USU to complete:

1. Name of S/T/DC:
2. Date(s) of training:
3. Time(s) of training:
4. How many training sessions will occur in total?
5. Date LOS was signed:
6. USU person of contact (POC) information:
 - a. Name:

- b. Job title:
- c. Email:
- d. Phone number:

For S/T/DC to complete:

1. Please provide the address of the on-site training location:
 - a. Full Name:
 - b. Address Line 1:
 - c. Address Line 2:
 - d. City:
 - e. State/Province/Regions:
 - f. Zip/Postal Code:
2. Please provide the mailing address of the location to which the lock boxes should be sent:
 - a. Full Name:
 - b. Address Line 1:
 - c. Address Line 2:
 - d. City:
 - e. State/Province/Regions:
 - f. Zip/Postal Code:
3. Please provide the mailing address of the location to which printed materials should be sent if different from lock boxes:
 - a. Full Name:
 - b. Address Line 1:
 - c. Address Line 2:
 - d. City:
 - e. State/Province/Regions:

- f. Zip/Postal Code:
4. Training Day POC information:
- a. Name:
 - b. Job title:
 - c. Email:
 - d. Phone number:
5. Which airport(s) do you recommend we travel to?
6. Is this training being requested in response to a specific event (i.e., suicide, change of leadership, DEOCS results, etc.)?
- Yes, please explain:
 - No
7. Will the training be a part of any of the following?
- Annual training
 - Family day
 - Drill weekend
 - Yellow Ribbon event
 - Other, please explain:
8. What are the types of units that will be participating in training? Please also specify if ARNG, ANG, or both:
9. What is the total estimated number of training attendees?
10. What is the estimated number of training attendees per session?
11. Where will the training take place? Please name the specific room:

12. What is the setup of the training room?

- Classroom
- Auditorium
- Gymnasium
- Other, please explain:

13. Does the training room have any restrictions?

- Yes, please explain:
- No

14. Is there a projector with HDMI cable connection that we can connect our laptop to?

- Yes
- No, please explain:

15. Participants will be requested to scan a QR code to complete an electronic survey at the start and end of the training session. Will participants have access to cellular data or be able to connect to WiFi on personal devices in order to complete surveys pre- and post-training?

- Yes
- No, please explain:

16. Please provide detailed instructions for accessing the training site. For example, is there a gate? Will doors be unlocked? What form(s) of identification are required? Are there specific pre-event requirements our team needs to complete for access? Please explain.

17. Is on-site parking available?

- Yes, please explain:
- No, please provide instructions for accessing the nearest available parking:



Anduril LLC

