



JOINT SPONSORSHIP PROCESS

Updated August 15, 2023

In accordance with [Regents' Rules and Regulations, Rule 80105](#), please follow the Joint Sponsor process as listed below.

STEP 1: INITIAL CONTACT

The initial contact can begin from any of the following in terms of utilizing UT Tyler space for a program/event:

- Outside group contacts Office of Community Partnerships
- Office of Community Partnerships contacts outside group
- Outside group contacts someone else at the University
 - Event Management
 - College
 - Department

A Joint Sponsorship means that the event is co-branded with UT Tyler/a UT Tyler Department and an outside organization and is a joint effort in terms of planning and execution.

Please note that only spaces on campus designated as “Special Use Facilities” per the [H.O.P. Section 4.4.1](#) are available for public use. This includes the Al and Nancy Jones Auxiliary Gym (PHE Gym), Alumni House, the Art & Art History Lecture Room, Athletic Fields and facilities, Braithwaite Hall and Meadows Gallery Lobby, The Cowan Center Vaughn Auditorium and lobbies, Herrington Patriot Center, Intramural Field, and Patriot Plaza and Patriot Plaza North. Any other space is unavailable for public use without a Joint Sponsorship.

STEP 2: APPROVAL OF JOINT SPONSORSHIP

In all instances, the Office of Community Partnerships must approve the Joint Sponsorship. Please send event details (organization name, date, time, location, expected attendees, & brief description of event) to Brittany Childs at bchilds@uttyler.edu as well as the appropriate Dean, VP and/or Department Head. The request will then be reviewed by the Sponsorship Committee monthly. Please communicate with Community Partnerships to ensure that the timing of your request aligns with the Sponsorship Committee meeting date, so they can review the request in a timely manner.

If the event aligns with the University mission and is a good fit for a Joint Sponsorship, the Office of Community Partnerships and the Sponsorship Committee will approve the Joint Sponsorship and assign a Stakeholder Category.

If the University is serving as the entity represented in the Joint Sponsorship, the Office of Community Partnerships will serve as the Point of Contact (POC). If a specific University department is the entity represented in the Joint Sponsorship, the department will identify someone to serve as the POC through the entire process.

Point of Contact (POC) = this person will see the Joint Sponsorship process through completion including but not limited to:

- *Collect data from organization*
- *Actively be involved in the planning/communication process.*
- *Serve as primary POC for the organization in terms of updates, answering questions, etc.*
- *Reserve space on campus*
- *Ensure the Event Management Coordination Form (EMC) is completed*
- *Collect necessary data and fee information from Event Management*
- *Ensure that Use Agreement is signed in a timely manner*

- *Attend event*
- *Receive invoice from Event Management at conclusion of event, forward to organization, and/or ensure payment is made in a timely manner*

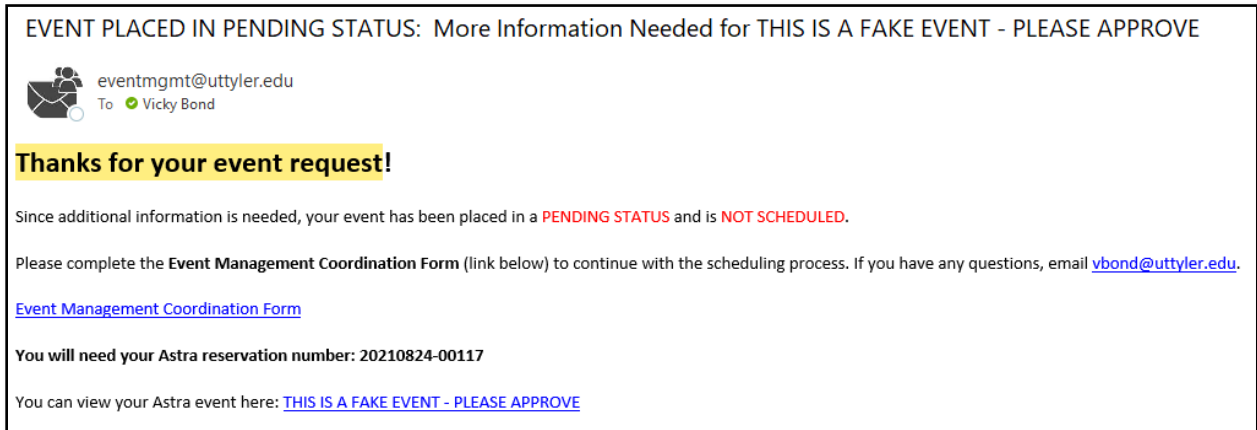
STEP 3: REQUEST SPACE IN ASTRA

Once approval has been obtained from the Office of Community Partnerships, the POC will request space on campus through Astra. The event will then be placed in a pending status for review. The POC will need general information to complete the Astra request, including but not limited to:

- *Date*
- *Time*
- *Location*
- *Is food being served*
- *# of expected attendees*
- *Parking information*

Since a Joint Sponsorship requires additional information to be processed as an Event, an EMC form will be sent to the POC to complete.

Sample e-mail received by POC after space is requested in Astra



STEP 4: COMPLETE THE EVENT MANAGEMENT COORDINATION FORM (EMC)

Once the Astra record is placed in a pending status, the EMC will be sent to the POC since additional data is needed to complete the Astra record and the Joint Sponsored Facility Use Agreement. This will include questions including, but not limited to:

- *Anticipated attendance*
- *Will the event have minors?*
- *Is housekeeping needed?*
- *Will event setup/teardown be needed?*
- *Is A/V needed?*
- *Will anything be delivered to campus?*
- *Information about food vendors?*
 - *NetHealth permits*
 - *Insurance*
- *Is alcohol being served?*

- *Is sponsorship associated with the event?*
 - *If yes, what dollar amount is associated with the benefits UT Tyler is receiving?*
- *Does the client have insurance that meets UT Tyler's requirements? (see Page 6 for sample)*
 - *Client must provide necessary proof of insurance if already covered.*
 - *If client does not have insurance, a Temporary User Liability Insurance Policy (TULIP) can be purchased from UT Tyler through Event Management.*
- *Outside organization contact information*
 - *Who will be signing the Use Agreement?*
 - *What is their email address?*

At this point, the POC may need to communicate with the outside organization to obtain all relevant information pertaining to the event. Once the form is complete in its entirety and submitted, the POC will receive additional instructions about the next steps to ensure that the event is successful. This may include further conversations with the UT Tyler Police Department, Environmental Health & Safety, etc.

Sample E-mail Received by POC after EMC Completed

EVENT IN PENDING STATUS - THIS IS A FAKE EVENT - PLEASE APPROVE

eventmgmt@uttyler.edu

To: ● Vicky Bond

↩ Reply
↩ Reply All
→ Forward
⋮

Tue 9/7/2021 12:26 PM

Hello!

You are receiving this email because **Vicky Bond** completed the Event Management Coordination form for their upcoming event: **THIS IS A FAKE EVENT - PLEASE APPROVE**.

This event is currently in a PENDING status.

In order for this event to be final approved, please see the list of Action items below as well as the Notifications section, which provides additional information.

Action Items

- Alcohol at Event:** Via the Event Management Coordination form (just completed), your request to serve alcoholic beverages has been sent to both the UT Tyler Chief of Police and President. You are not allowed to serve alcohol until you receive email approval. Please contact eventmgmt@uttyler.edu if you have any questions.
- Alcohol at Event - Mandatory Police Presence:** Information regarding this event has been sent to UTPD. Please ensure you receive a quote from Sgt. Kennedy.
- 50+ Attendees in an Assembly Space:** Determine who will serve as your Certified Crowd Manager, have them take the recommended course (www.crowdmanagers.com/training), and send completed certification email to eventmgmt@uttyler.edu.
- Off-Campus Food Vendors:** Provide a copy of the current NETHealth Food Permit to foodsafety@uttyler.edu BEFORE the event occurs. Vendors from outside of the NETHealth district must obtain a Temporary Food Vendor permit from NETHealth prior to serving food on campus. Temporary permit paperwork must be filed no later than 2 weeks before the event.
- External or Joint Sponsored Event - Liability Insurance:** If external client has their own insurance, please make sure it meets the requirements set forth by UT System (see Notifications below). If a TULIP is needed, please email eventmgmt@uttyler.edu.
- Setup/Teardown Needed:** Provide a layout of your event to Event Management. If a blank layout of your location is needed, Event Management can provide one as a starting point.
- Police Presence Requested:** Information regarding this event has been sent to UTPD. Please ensure you receive a quote from Sgt. Kennedy.

Notifications

- Requirements to Serve Alcohol on UT Tyler Property**
Approval must be granted by UT Tyler Police Department and the President, or his designee at least one (1) month prior to the date of the event. Requirements are below:
 - UTPD onsite security is mandatory (additional fee).

STEP 5: DETERMINE FEES

Depending on the nature and details of the event, there will likely be fees associated with the Joint Sponsorship that the outside entity will be responsible for paying.

Potential fees associated with events:

- **Administrative Fee** = fee for Event Management services
- **Rental Fee** = fee that would normally be charged to reserve space for outside groups
- **Overhead Costs** = costs associated to maintain the space per Facilities
- **Porter Fees** = required for events with food, large number of attendees, etc.
- **Setup/Teardown** = if setup/teardown is outside of normal working hours
- **Certified Crowd Manager (CCM)** = required if the event has 50 people. At 250 attendees, two (2) CCMs are required; 500 people, three (3) CCMs are required; etc.
- **UTPD** = required if alcohol is being served or 500+ attendees
- **Insurance (TULIP)** = must be purchased if the outside organization does not carry required liability insurance coverage

It is possible to waive some fees associated with events.

The Office of Community Partnerships will communicate with Event Management to determine the Stakeholder Level that may be applied towards the reservation fees. In any scenario, the outside organization will be required to pay the following:

- Porter Fees
- Setup/Teardown Fees (outside of their normal working hours)
- Certified Crowd Manager Fees
- UTPD Fees
- TULIP Insurance (if organization is unable to provide proof of insurance that meets requirements)
- Any other hard cost associated with the event.

For groups that fall under Stakeholder Level 3 (strategic stakeholders and/or students K-12) and for which the host College/Department determines it is beneficial for the University to do so, the host College/Department may be able to offset those costs on behalf of the organization. Only self-generated funds and/or donor/gift funds may be used for this purpose. Tuition and fees or state funds may not be used for these situations.

STEP 6: CONFIRM DETAILS AND CREATE USE AGREEMENT

The POC will send the following information to Event Management to create the Use Agreement:

- Sponsorship level information and associated benefits (if applicable)
- Proof of insurance (if applicable)

Please note that the Legal Department needs 10 days at a minimum to process and execute the User Agreement, so timing is key to collecting the appropriate information needed to create the User Agreement.

Event Management will collect official quotes, communicate fees to the POC for verification, create the Use Agreement, and send it to all parties via DocuSign. The POC should notify the outside organization that the Use Agreement will be on its way and offer to answer questions (if they are unfamiliar with using DocuSign). The POC will be copied on the DocuSign, so they know that the document is on its way.

At this point, the POC will make sure that all other details are communicated to the outside group in preparation for the event/program, including:

- Any additional information in terms of setup
- Is a planning meeting needed with members of Event Management, Environmental Health & Safety, etc.?
- Parking information
 - Send campus map
 - Are temporary parking passes needed?

STEP 7: INVOICE AND RECEIPT OF PAYMENT

Event Management will invoice the outside organization and send with the executed Use Agreement. Payment is due prior to the first date of the event. The POC is to ensure the invoice is paid in a timely manner.

STEP 8: PRESENCE AT EVENT

The POC or appropriate delegate must be present at the event to troubleshoot, answer questions, etc. This may include, but is not limited to:

- Welcoming group to campus
- Ensuring space is set up correctly
- Assisting with equipment (if applicable)
- Notifying Physical Plant if space is too hot/cold

APPENDIX A

Certificate of Liability Insurance – Sample Form

	CERTIFICATE OF LIABILITY INSURANCE	DATE (MM/DD/YYYY) 12/23/2021														
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.																
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).																
PRODUCER Superstar Brokerage Firm 2300 Cielo Vista Dr. Austin, TX 78724	CONTACT NAME: John Hancock PHONE (A/C, No, Ext): 512-499-4545 FAX (A/C, No): 512-499-4554 E-MAIL ADDRESS: jhancock@superstar.com															
INSURED XYZ Janitorial Company 15 Flats Street Houston, TX 77008	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A : Chubb Indemnity Insurance Company</td> <td>12777</td> </tr> <tr> <td>INSURER B : ACE American Insurance Company</td> <td>22667</td> </tr> <tr> <td>INSURER C : Liberty Mutual Fire Insurance Company</td> <td>23035</td> </tr> <tr> <td>INSURER D : Evanston Insurance Company</td> <td>53578</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Chubb Indemnity Insurance Company	12777	INSURER B : ACE American Insurance Company	22667	INSURER C : Liberty Mutual Fire Insurance Company	23035	INSURER D : Evanston Insurance Company	53578	INSURER E :		INSURER F :	
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INFORMATION ONLY

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:																																																
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DISEASE - POLICY LIMIT \$ 1,000,000 </td> </tr> <tr> <td style="text-align: center;">D</td> <td>Professional / Cyber Liability</td> <td style="text-align: center;">Y</td> <td></td> <td style="text-align: center;">PRO0123456</td> <td style="text-align: center;">12/23/2021</td> <td style="text-align: center;">12/23/20xx</td> <td>Each Claim \$10,000,000</td> </tr> </tbody> </table>	INSR LTR	TYPE OF INSURANCE	ADOL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER	Y	Y	CGL0123456	12/23/2021	12/23/20xx	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP OP AGG \$ 2,000,000 \$	A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	BAL0123456	12/23/2021	12/23/20xx	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	B	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ 5,000	Y	Y	UMB0123456	12/23/2021	12/23/20xx	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$	C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? 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The University of Texas System Board of Regents, The University of Texas System, The University of Texas at Tyler, and The University of Texas Health Science Center at Tyler are named as additional insureds as required by written contract. A waiver of subrogation in favor of The University of Texas System Board of Regents, The University of Texas System, The University of Texas at Tyler, and The University of Texas Health Science Center at Tyler as required by written contract.																																																		
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CERTIFICATE HOLDER	CANCELLATION																																																	
The University of Texas System Board of Regents The University of Texas System The University of Texas at Tyler The University of Texas Health Science Center at Tyler 3900 University Blvd. Tyler, TX 75799	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE **Authorized Representative signature - NOT A STAMP**																																																	

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ACORD 25 (2016/03)

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APPENDIX A

Certificate of Liability Insurance – Quick Tips

Quick Tips: Understanding the Acord Certificate of Insurance

1. PRODUCER
Insurance Agent/Broker who issues certificates.

2. NAME OF INSURED
Must be the legal name of the contracting party.

3. TYPES OF INSURANCE
Must include the types of insurance required by contract.

4. POLICY FORM
"Claims made" or "occurrence" form; see Glossary for definitions.

5. AGGREGATE LIMIT
An aggregate per policy limit applies for the entire policy year; a per project aggregate is applied to individual projects; a per location limit applies the aggregate separately to each location.

6. ADDITIONAL INSURED/WAIVER OF SUBROGATION
The Board of Regents of The University of Texas System must be named additional insured with a waiver of subrogation.

7. CERTIFICATE HOLDER
Must be The Board of Regents of The University of Texas System.

8. POLICY EFFECTIVE DATE
Must be prior to or coincidental with effective date of contract.

9. POLICY EXPIRATION DATE
If occurrence form, date must be on or after termination of contract.

10. LIMITS OF INSURANCE
Must be the same or greater than required by contract.

11. DESCRIPTION OF OPERATIONS
Typically used for additional information. Place, event times and projects are sometimes described here.

12. NOTICE OF CANCELLATION
Refer to policy to determine carrier's practices regarding cancellation.

13. AUTHORIZED REPRESENTATIVE
Must be signed, not stamped.

- THE PRODUCER:** Produces or orders Certificate for Insured; answers questions, revises certificate to meet contract requirements.
- NAME OF INSURED:** Must be legal name of contracting party.
- TYPES OF INSURANCE:** Must include types required by contract.
- POLICY FORM:** Will indicate claims-made or occurrence form; see "9. Policy Expiration Date" for additional information.
- AGGREGATE LIMIT:** An aggregate per policy limit applies for the entire policy period (usually one year); a per project aggregate is applied to individual projects; a per location limit applies the aggregate separately to each location.
- ADDITIONAL INSURED/WAIVER OF SUBROGATION:** The certificate must include a "Y" for additional insured and waiver of subrogation.
- CERTIFICATE HOLDER:** Must be the Board of Regents of The University of Texas System; address must include campus, department and contact person.

- POLICY EFFECTIVE DATE:** Must be prior to or coincidental with effective date of contract.
- POLICY EXPIRATION DATE:** For "occurrence" form coverage, date should be on or after the termination date of contract. If "claims-made coverage," coverage must survive for a period not less than three years following termination of contract and shall provide for a retroactive date of placement prior to or coinciding with the effective date of contract.
- LIMITS OF INSURANCE:** Must be same or greater than required by contract.
- DESCRIPTION OF OPERATIONS:** Review information in this section to determine it is consistent with contract.
- NOTICE OF CANCELLATION:** Refer to policy to determine carrier's practices regarding cancellation.
- AUTHORIZED REPRESENTATIVE:** Must be signed by an authorized representative of Producer.