Print Form

Application for Approval by Campus Life Committee and Academic Committee

Field Trip, Summer Tour & Activity Request Form

Instructions: Use this form to request permission for all field trips not listed in the *Calendar of Events*. Submit the completed form to the Office of Student Services at least **two** weeks in advance of the trip. If the trip involves any time period between 7:45 am, Monday, and noon, Friday, while classes are in session, submit the form at least **three** weeks in advance.

Instructor/Supervisor: Date of Request:

Course # and Title (if an academic trip):

Club/ Organization (if a non-academic trip):

Sponsors/volunteers:

Departure Date and Time: Return Date and Time:

Transportation:

Destination and Purpose of Trip:

Activity: (please attach an itinerary)

Students involved (alphabetized: last name, first name)

Possible Risks:
Potential hazards may include but are not limited to the following:

- ☐ **Cabin use/cooking** – burns from woodstove, camp stoves, or cooked food; falling off ladder or bunk; cuts from hatchets, knives, or camping implements, insect bites or stings.
- ☐ **City** – traffic hazards; separation from group; unwanted approaches from strangers
- ☐ **Driving** – motor vehicle accidents or injuries
- ☐ **Hiking** – injuries sustained hiking on uneven and/or unstable ground; falling from heights, footbridges, or tripping; falling rocks or trees; hostile wildlife, cuts or abrasions from sharp sticks and rocks; hypothermia, dehydration, exhaustion
- ☐ **Lakes and Rivers** – drowning, falling into creeks, injuries from being swept downstream, hypothermia or illness from contaminated water, possibly small bruises or blisters
- ☐ **Weather** – lightning, hail, debris from wind, water, or flooding, warm and cold temperatures, remote chance of mudslides or avalanches
- ☐ **Athletic Event** – broken limbs, concussion, soft tissue injuries, dental injuries, bruises
- ☐ **Other**

Actions:

CAMPUS LIFE COMMITTEE: ☐ APPROVED ☐ DENIED ☐ DATE:

Signature: Date:

ACADEMIC COMMITTEE: ☐ APPROVED ☐ DENIED ☐ DATE:

Signature: Date:

Denied based on the following reasons:

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