Application for Approval by Campus Life Committee and Academic Committee

## Burman University Field Trip & Activity Request Form

**Instructions:** Use this form to request permission for all field trips/activities 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:	
Purpose of Trip/Activity:	

\_\_\_\_

\_\_\_\_\_

Students involved (alphabetized: last name, first name)

\_\_\_\_\_

## Possible Risks:

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

<b>Cabin use/cooking</b> – 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
<b>Hiking</b> – 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:

DENIED DATE:	DENIED	APPROVED	CAMPUS LIFE COMMITTEE:
--------------	--------	----------	------------------------

Signature:

Date:

ACADEMIC COMMITTEE: APPROVED DENIED DATE:
ACADEIVIIC COMIVITTEE. AFFICIVED DENIED DATE.

Signature:

Date:

Denied based on the following reasons: