

# Student Travel and Field Trip Expectations and Consent Agreement

Every student participating in a university sponsored trip must read and sign this consent form prior to departure or the beginning of the event. In addition, students who are younger than 18 years of age must have the signature of a parent or guardian.\* **If you are traveling with a recognized student organization, or your travel is sponsored/funded by the Student Involvement and Leadership Center, do not use this form.** Contact Student Involvement at [getinvolved@boisestate.edu](mailto:getinvolved@boisestate.edu) or 208-426-1223.

**International travel requires additional planning:**

- Contact **International Learning Opportunities** for their recommendations regarding safety, health and travel information relative to foreign travel: Sara Dart or Ami Tain 426-2630 email [studyabroad@boisestate.edu](mailto:studyabroad@boisestate.edu)
- For general information regarding Int'l travel, please review [Risk Management-Foreign Travel Guidelines](#)
- Notify Risk Management if event includes International travel <http://rmi.boisestate.edu/>

**Payment methods for travel:**

P-Card can be used to prepay airfare, lodging, and registration for approved student travel. The student may be reimbursed for other travel expenses or department may request a student \*travel card with cash advance option to cover per diem or other approved travel expense.

\*Travel card requires advance notice (7-10 days)

All fields are required. Boise State Travel Policy 6180 applies to all university travel.

\*\*Department sponsored travel paid for international students is a taxable expense to the student. Please contact [taxreporting@boisestate.edu](mailto:taxreporting@boisestate.edu) for assistance with reporting. Additional form is required for international students to travel.

[http://vpfa.boisestate.edu/process/uformsdocs/International\\_Student\\_Travel.pdf](http://vpfa.boisestate.edu/process/uformsdocs/International_Student_Travel.pdf)

Department \_\_\_\_\_ Department Contact: \_\_\_\_\_  
 Student Name \_\_\_\_\_ University ID# \_\_\_\_\_ Currently Enrolled [ ] \*\*International Student [ ]  
 Emergency Contact Name \_\_\_\_\_ Emergency Contact Number \_\_\_\_\_ Relationship \_\_\_\_\_  
 Event Name or Description: \_\_\_\_\_

Lodging Name \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_  
 Zip \_\_\_\_\_ Country \_\_\_\_\_

Purpose of Travel : Academic [ ] Service Learning [ ] Research [ ] Other [ ] (ie conference, interview, etc)

Description: \_\_\_\_\_

Departure date: \_\_\_\_\_ Return date: \_\_\_\_\_ Number of days absent \_\_\_\_\_

Estimated Trip Expenses (Expense to be paid by university) Department ID for expense: \_\_\_\_\_

Travel expense type:	Estimated Amount	✓ Check planned payment method below				
		P-Card Expense	Direct Vendor Payment	Third Party Payment	Reimbursable Expense	Cash Advance
Airfare			N/A			N/A
Registration						N/A
Lodging(provide address)						
Per Diem (meals, incidentals)			N/A			
Transportation			N/A			
Other						
<b>Totals</b>						

**Travel Advisor:**

Boise State University requests that an advisor (faculty or staff) be identified for all student travel. This must be someone who is willing to be a point of contact for the university during travel. Advisor may not be required to travel with students, consult sponsoring department.

Travel Advisor name:	Travel Advisor phone number:
Boise State University ID number:	Travel Advisor signature X

**Department Approval:**

Department Travel Approver Signature	Please Print Name/Title
Department Travel Approver 2 Signature	Please Print Name/Title
Department Travel Approver 3 Signature (Optional)	Please Print Name/Title

**Waiver:** I have enrolled and intend to participate in field trip/events sponsored by Boise State University identified on page 1 of this form. I acknowledge that I have read the course/program outline and voluntarily accept all risks associated with the activities. I have also read the "General Field Trip/Event Expectations" (found in the Policy Manual for Student Organizations) and agree to abide by the indicated directives.

I agree to release, waive all claims, hold harmless, discharge, and covenant not to sue Boise State University, the State of Idaho, the State Board of Education, all officers, employees, and agents from liability from any and all claims including the negligence of Boise State University resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in the field trip/event, due to my negligence.

I further agree that I am solely responsible for my own equipment, personal property and effects during the course of the field trip/event. I agree that all parties above whom I hold harmless from liability are only responsible for the general supervision of the logistical/educational aspects necessary to provide a safe field trip/event and that they cannot and do not guarantee my personal safety.

I further agree that if I drive my own motor vehicle for transportation to, during or from the program site, I am responsible for my own acts and for the safety and security of my own vehicle. I accept full responsibility for the liability of myself and my passengers, and I understand that if I am a passenger in such private vehicle, Boise State University and its personnel are not in any way responsible for the safety of such transportation and that State of Idaho insurance does not cover any damage or injury suffered in the course of traveling in such vehicle. Please note that the University's insurance policy does not provide liability or physical damage coverage for students when using their own vehicle. **NO COVERAGE IS PROVIDED FOR DAMAGE TO YOUR VEHICLE. THE ONLY RECOURSE FOR DAMAGE TO YOUR VEHICLE IS YOUR OWN INSURANCE POLICY.** If driving your own vehicle, you must provide a copy of your driver's license and proof of insurance.

I have obtained and agree to use my personal medical insurance as primary medical coverage if accident or injury occurs. I have notified the supervising instructor/staff member of any existing medical condition or medication which could affect my ability to fully participate in this field trip/event. In the event that any medical attention is needed, I authorize the advisor of the field trip/event or any qualified individual to administer the first aid necessary to maintain health until a physician may be reached or other medical assistance obtained. I further authorize any physician to administer such medical or surgical treatment diagnosed as necessary.

I HAVE CAREFULLY READ AND VOLUNTARILY CONSENT TO THIS FIELD TRIP RELEASE AND WAIVER.

## Travel Expectations

Students are representatives of Boise State University whenever they participate in an off-campus activity sanctioned by the university, or where there is a substantive connection between their participation in the activity and the fact they are Boise State students. As such, students' behavior at off-campus activities, regardless of scope or distance from campus, is reflective of the university, and students are therefore expected to:

Maintain the safety and well-being of students, faculty and staff of Boise State, as well as other individuals contacted in any capacity during the travel. Respect the

security and protection of property belonging to individuals, to Boise State and to other institutions and establishments.

Create an environment and maintain practices that sustain the educational goals of the travel.

Pledge obedience to all laws, all Boise State University policies, and policies of any facility or university where students may be at all times. Students traveling are personally responsible for their behavior and the consequences for that behavior. Note: students traveling on behalf of Boise State University are not covered under the State's Retained Risk Fund (state insurance) and may be personally liable for their actions.

Follow the Boise State University Student Code of Conduct. Anyone violating the Student Code of Conduct while traveling is subject to the sanctions enumerated in Articles 10 and 11 of that code.

Individuals detained by proper authority or incarcerated during travel should not expect assistance or remuneration from the university. Boise State University, as an entity, employees and authorized volunteers have no obligation to provide said individuals with legal assistance. Nor is Boise State University, or any of its employees or authorized volunteers, obliged to secure the release of said individuals, seek judicial relief for them, or provide alternative transportation to Boise subsequent to their release from custody.

Individuals evicted from their place of lodging are personally responsible for obtaining and paying for their own alternative lodging. Any damages incurred at any lodging establishment are the complete and direct responsibility of the student(s) assigned to the damaged room(s). Read the following articles in the Boise State Student Code of Conduct:

Destruction/Damage/Misuse of Property, Article 4, Section 14 Group  
Offenses, Article 4, Section 23  
Restitution, Article 10, Section 3

Transportation is a privilege afforded to students by the university. Individuals whose actions threaten the lives or safety of others, or violate the law, while in transit to or from an off-campus location, will immediately forfeit that privilege, regardless of any inconvenience or expense to that individual.

The Idaho State Board of Education strictly prohibits transportation of alcoholic beverages and weapons while in a state-owned vehicle. Read the following articles in the Boise State Student Code of Conduct:

Alcohol, Article 4, Section 2  
Firearms/Weapons, Article 4, Section 12

Unless otherwise directed, individuals who fail to meet prearranged transportation schedules (if any) are expected to utilize available public transportation at their own expense.

By my signature below, I hereby agree that I have read and will abide by the Travel Expectations outlined above while on approved student travel.

I UNDERSTAND THIS TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY INJURY OR DEATH OR PROPERTY DAMAGE THAT OCCURS WHILE PARTICIPATING IN THE FIELD TRIP.

X \_\_\_\_\_  
Student Signature date signed

## Parent or Guardian Approval (if participant is younger than 18 years of age)

I UNDERSTAND THIS TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY CHILD'S INJURY OR DEATH OR PROPERTY DAMAGE THAT OCCURS WHILE PARTICIPATING IN THE TRIP.

X \_\_\_\_\_