

Submit one week in advanced of departure date.

IMPERIAL VALLEY COLLEGE REQUEST FOR APPROVAL OF FIELD TRIP

| Instructor | Date |
|--|---|
| | |
| Description of proposed field trip (in conneagenda if available. | ection with which class or organization?) Attach descriptive brochure or |
| | To |
| Estimated time of departure from IVC | a.m/p.m Time of arrival at destinationa.m/p.m |
| Estimated time of departure from destination | ona.m/p.m Time of arrival at IVCa.m/p.m |
| Method of transportation: \Box College | Other |
| | registered owner. If request is for out-of-country travel and college contact the Vice President for Business Services to make arrangements for |
| Faculty Sponsor(s) | |
| Students involved: (attach Field Trip Rel | ease and Waiver) |
| Should faculty be notified of students' absorbed | ences? Yes \(\subseteq \text{No} \(\subseteq \) |
| Arrangement for substitute instructor(s) if | classes are missed: (attach Absence of Certificated Employee form) |
| Estimated <u>expenditures</u> and <u>source of fund</u> | s: (attach itemized list if necessary) |
| Can be reached in case of emergency at: | |
| Have participants been notified that medic business office? | al/hospitalization insurance coverage is available for this trip by applying at the |
| *********** | ****Office Use Only**************************** |
| Recommendation and Authorization: | |
| Recommended Approval | Approval |
| No Recommendation | Disapproved |
| Division Chairperson Date | Vice President of Academic Services Date |

IMPERIAL VALLEY COLLEGE Imperial Community College District

Field Trip Release and Waiver With Medical Release

My Signature acknowledges I am a student at Imperial Valley College. I am participating in this activity on a voluntary basis and further acknowledge that such participation exposes me to risks inherent in a field trip.

In consideration for Imperial Valley College's making such opportunities available to me, I, for myself, my heirs personal representatives and assigns, do hereby release, discharge and covenant not to sue Imperial Valley College, its trustees, officers, employees, agents, successors, and assigns from any and all claims and liability arising out of ordinary carelessness or negligence of the releases causing me injury, death or damage which occurs during or relates to my travel to and from or participation in the following:

Course Title:

| | Desunation: | |
|---------------|--|---|
| | Date/Time: | |
| | Faculty Sponsor: | |
| | Print | Signature |
| whic inclu | h may be required if I experienced a medical | ze the Faculty Sponsor and consent to his/her decision for any treatment al emergency. This consent includes but is not limited to examination or medical or dental which my Faculty Sponsor deems necessary for my |
| | | EPT ALL RISKS ASSOCIATED WHITH FIELD TRIP. I SIGN AGREE TO ACCEPT ALL OF THE PROVISIONS IN THIS |
| | Executed thisday of | , 200at Imperial, California. |
| 1. | Print Name: | Signature |
| 2. | Print Name: | Signature |
| 3. | Print Name: | Signature |
| 4. | Print Name: | Signature |
| 5. | Print Name: | Signature |
| 6. | Print Name: | Signature |
| 7. | Print Name: | Signature |
| 8. | Print Name: | Signature |
| 9. | Print Name: | Signature |

10.

| 11. | Print Name: | Signature |
|-----|-------------|-----------|
| 12. | Print Name: | Signature |
| 13. | Print Name: | Signature |
| 14. | Print Name: | Signature |
| 15. | Print Name: | Signature |
| 16. | Print Name: | Signature |
| 17. | Print Name: | Signature |
| 18. | Print Name: | Signature |
| 19. | Print Name: | Signature |
| 20. | Print Name: | Signature |
| 21. | Print Name: | Signature |
| 22. | Print Name: | Signature |
| 23. | Print Name: | Signature |
| 24. | Print Name: | Signature |
| 25. | Print Name: | Signature |
| 26. | Print Name: | Signature |
| 27. | Print Name: | Signature |
| 28. | Print Name: | Signature |
| 29. | Print Name: | Signature |
| 30. | Print Name: | Signature |
| 31. | Print Name: | Signature |
| 32. | Print Name: | Signature |
| 33. | Print Name: | Signature |
| 34. | Print Name: | Signature |