

Please type this request. Handwritten documents  
(except signatures) will not be accepted.

# Student Travel Authorization Request

Department: \_\_\_\_\_

Student Organization: \_\_\_\_\_

Other: \_\_\_\_\_

## Trip Coordinator/Trip Information

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Trip Coordinator's Department: \_\_\_\_\_

Office Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Purpose: \_\_\_\_\_

Destination: \_\_\_\_\_

Travel Dates: Departure: \_\_\_\_\_ Return: \_\_\_\_\_

Total # of Student Participants: \_\_\_\_\_ Total # of Non-Student Participants (including CU Staff/Faculty): \_\_\_\_\_

Lodging Arrangements (if applicable) Name of Hotel, Address, and Phone: \_\_\_\_\_

Name of Lead CU Employee Traveler: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_

## Travel Arrangements

Airline Travel: \_\_\_\_\_

Flight Information: \_\_\_\_\_

Vehicle: \_\_\_\_\_

CU-Owned  Personal Vehicle  Rental Van  Other: \_\_\_\_\_

Name(s) of Drivers: \_\_\_\_\_

*In an effort to protect the safety of the motor vehicle operator, passengers, and other motorists and comply with state law, all drivers whether state employees, volunteers, or students are not permitted to use electronic handheld devices, including cellular or mobile telephones, pagers, digital assistants, laptop computers, or any other electronic communication device while operating the motor vehicle. **Students are prohibited from driving other students to and from University sponsored events in privately-owned vehicles.***

## Emergency Contact

Department employee designated as on-campus emergency contact: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Required Documents**

The Trip Coordinator must initial applicable items below. Coordinator must acquire and keep on file all of the following documents as required by the University's Records Retention Policy:

Student Travel Roster (see T7 form updated Sept 2022) Note: Roster amendments must be submitted to the Student Services office before trip commences.

Voluntary Assumption of Risk and Informed Consent forms for all participants (see T8 form dated Sept 2022)

Student Travel Insurance (see T9 form dated Sept 2022) Note: Student travel insurance is required for all trips

Verification of driver's licenses for all drivers (if applicable)

Verification of current liability insurance (if using personal vehicles only)

For international travel, copies of passport for all participants (one copy with dept. and one copy with Office of Academic Affairs)

**Trip Coordinator Acknowledgment**

My signature below verifies that I have read the Cameron University Student Travel Policy and affirm that this trip meets all requirements of this policy.

Trip Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Department Chair/Director Recommendation**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Academic Dean or Appropriate Vice-President Recommendation**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Note: All appropriate signatures above must be obtained before submitting to the Office of the Dean of Students.**

**Dean of Students**

Name: Jerrett Phillips, Ph.D. Title: Vice President and Dean of Students, EMSS

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Travel Request Approved       Travel Request Denied

**FOR STUDENT SERVICES USE ONLY:**

Date Received: \_\_\_\_\_ Added to W Drive: \_\_\_\_\_

Signature: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_