

FIELD TRIP PLANNING AND ITINERARY FORM



This form is used by the Field Trip Leader leading the field trip. It should be completed as early as possible prior to the beginning of the semester in which the field trip is planned. A copy should be left with a designated emergency contact person in the department. A copy should be kept by the field trip leader and taken on the field trip itself.

1. Field Trip Leader: _____
Title: _____ Department: _____
Work Phone: _____ Cell Phone: _____
Email: _____

2. Class Information:
Class Name: _____ Course Number: _____
Number of Participants: _____

3. Departure: Date: _____ Time: _____ Location: _____

4. Return: Date: _____ Time: _____ Location: _____

5. Destination: Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact at Destination: _____
Contact Phone Number: _____

6. Planned Route: _____

7. Purpose of Field Trip: _____

8. Transportation Arrangements: _____
Indicate the number of vehicles on the line beside the vehicle types:
___ University Vehicle(s) ___ Private Cars ___ Charter/Bus(es) ___ Student(s) provide own transportation

9. Designated Department Emergency Contacts:
Primary Contact _____ Contact Phone Number: _____
Secondary Contact _____ Contact Phone Number: _____

10. Emergency Services locations and contacts nearest to field trip site:
Police/Law Enforcement: _____ Phone Number: _____
Fire Department: _____ Phone Number: _____
Hospital: _____ Phone Number: _____
Other: _____ Phone Number: _____

Signed (Field Trip Leader): _____ Date: _____

Copy to the Field Trip Leader to take on field trip.
Copy to University, School, College or Department under which the class having the field trip is located.
Copy to the designated emergency contact person at the University.