

FIELD TRIP GUIDELINES AND FORMS

Some classes find field trips of special value. Field trips are encouraged to furnish the student with knowledge and educational experiences not available in the classrooms. Trips may be taken during class hours or at other specified times. Permission should be obtained from the Instructional Services Office before a field trip is announced to the students. Care should be taken that all students are notified about it sufficiently in advance so that all may participate.

Field trips shall not be scheduled during the two weeks prior to the start of final examinations each semester if the time of the field trips extend beyond the regular scheduled class period. A student cannot be required to miss other classes for a field trip if the instructors of those classes will not permit an absence, if they will not provide a reasonable means by which a student may make up the work, or they consider the student's class standing will be seriously harmed.

Field trip forms are available in the Office of Instructional Services (AD-145). The application for Field Trip Form must be completed by the instructor and approved by the Division Chairperson and the appropriate Instructional Dean prior to the trip date.

All students attending a field trip shall complete the Field Trip Student Participation and Emergency Form. If the student is under 18, the Permission for Emergency Care must also be completed. These forms should be completed in triplicate with the original being returned to the Office of Instructional Services (AD-145), a copy to be retained by the instructor so that it may accompany the student on the field trip and a copy for the student. It is the instructor's responsibility to see that the forms for all field trip participants are returned to the Office of Instructional Services (AD-145). A Release/Assumption of Risk form should be completed for voluntary participation where appropriate. A single form may be completed for multiple trips during a semester. All dates and locations must be listed on the form. However, if there are any changes, the appropriate forms must be updated to reflect any such changes.

Unless commercial transportation is needed, the instructor should not arrange the transportation as it could raise liability issues in the event of an accident. Please check with the Office of Instructional Services on procedure. Any instructor, college employee, and/or student must have a valid California Driver's License and current proof of insurance if driving his/her own private vehicle or driving a college vehicle for the field trip. The instructor should verify the information provided by the student. Students cited for careless driving within the preceding two years are not eligible to transport other students on field trips. Transportation expenses may be furnished from the appropriate Division budget if funds are available. If Division funds are not available, trips taken using private car transportation must be on a voluntary, non-reimbursed basis.

The California Education Code Section 1017, provides that the governing board of any school district shall insure against the liability of the district and against the personal liability of the members of the board and of the officers and employees of the district for damages to property of negligent act by the district, or by a member of the board, or any officer or employee when acting within the scope of his or her office or employment. The Glendale Community College District carries a policy for the purposes outlined above.

First Aid kits shall be taken on all field trips and shall be the responsibility of the instructor. First Aid kits may be obtained from Health Center.



APPLICATION FOR FIELD TRIP

Office of Ins	tructional Services:	Date:	
Division Cha	nir:	Date:	
	APPROVAL SIGI	NATURES	
	Instructors, college employees, and/or students driving to/from the field trip using his/her own private vehicle or using a college vehicle <u>must</u> have a valid California Driver's License and evidence of current insurance.		
	Prior to any off-campus trip students must complete the appropriate field trip forms available in the Office of Instructional Services (AD-145). It is the responsibility of the instructor to see that the students' forms are completed accurately and forwarded to the appropriate office for signature approvals.		
NOTES:	·	and borne by the instructor and students unless rough the Office of Instructional Services (AD-	
MEANS OF T	RANSPORTATION		
PURPOSE OF	TRIP(S)		
LOCATION(S) OF TRIP(S)		
RETURN TIM	1E(S)		
DEPARTURE	TIME(S)		
DATE(S) OF	TRIP(S)		
CLASS(ES) _			
DIVISION			
DATE OF RE	QUESTINSTRUCTOR NAME	CELL PHONE	
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STUDENT PARTICIPATION AND EMERGENCY FIELD TRIP FORM

(Each student must complete this form)

CLASS_		INSTRUCTOR
DATES((S) OF TRIP(S)	LOCATION(S) OF TRIP(S)
I have reserva		am willing to observe each of the following regulations without
1.	A field trip is a college follows:	e-sponsored activity; therefore, the rules of conduct are in effect as
2	campus and off w behave inapproprisuch action as the pb. It is contrary to Calcoholic beverage of those participatic. The responsibility fd. No firearms or fired e. An instructor may discourteous or wharked "F" for that petition as set forth	ior is expected of a student attending Glendale Community College on the participation in a college-sponsored activity. If a student should attely or neglect their academic duties, the Administration shall take particular offense requires. Alifornia State Law to transport, possess, serve or consume drugs or at any official college activity on or off campus regardless of the ageing. For property damage on any trip shall be defined by law. Crackers will be permitted on any trip. At any time exclude from the field trip a student whose conduct is no is neglecting the work of the course. A student so excluded may be the portion of the course work missed. Such action may be appealed by an in the College catalog.
۷.	·	en made, I will use that method for the entire trip.
3.		vehicle or volunteering to drive a college vehicle, I certify that I have a e and proof of current insurance.
<u>Emerg</u>	ency Contact Informatio	<u>on:</u>
1.	Name	Relationship
	Daytime Phone	Evening Phone
2.	Name	Relationship
	Daytime Phone	Evening Phone
Emerg	ency Care – Please list i	ALL of the following that apply to you:
Allergies:		Medications:
Medica	al Conditions:	
Studer	nt's Full Name (Please p	rint):Cell Phone:
Signati	ure:	Date:



RELEASE/ASSUMPTION OF RISK FOR PARTICIPATION IN VOLUNTARY ACTIVITY

The undersigned has requested participation in an optional activity. By his/her signature below (or the signature for a parent or guardian if the person is a minor), the signee acknowledges voluntary participation in the activity.

In addition to acknowledging and understanding the information above, the undersigned hereby voluntarily releases, discharges, waives and relinquishes all actions or causes of action for personal injury, property damage or wrongful death occurring to the participant arising as a result of engaging in this activity.

The signatory and for the participant, himself/herself, his/her heirs, executors, administrators or assignees agree to defend, indemnify and hold harmless Glendale Community College District from any and all claims or causes of action for personal injury, property damage or wrongful death which are brought or could be brought as a result of engaging in this activity.

The undersigned acknowledges that he/she has read the foregoing and is fully aware of the legal consequences of signing this document.

Participant (PRINT NAME)	Date
Parent (Required if minor)	Acknowledgment (SIGNATURE)



PERMISSION FOR EMERGENCY CARE

(To be completed if student is under 18 years of age)

CLASS
INSTRUCTOR
DATE(S) OF TRIP(S)
LOCATION(S) OF TRIP(S)
To Parent or Guardian:
Students have occasionally required medical emergency care either on campus or during field trips. It is the policy of many hospitals and doctors to refuse emergency treatment for individuals under 18 without parental permission. Sometimes a parent may be difficult or impossible to locate in time to ge proper care. Therefore, it is requested in advance of any such emergency, parental permission be granted for the care.
Permission is hereby granted for:
(Student's full name)
to receive emergency medical, dental, surgical or hospital care deemed necessary while attending Glendale Community College or an official college-sponsored activity.
Signature of Parent or Guardian
Address
Telephone Number(s) (Home, Cell and Work)
If the above-named student is a member of a religious faith for which medical treatment may not be appropriate, the parent or guardian may execute the following: The above-named student is a member of If an accident should occur requiring emergency medical service during college sponsored activities, please consult a practitioner of such faith.
Signature of Parent or Guardian
Address
Telephone Number(s) (Home, Cell and Work)