

FIELD TRIP PLANNING AND ITINERARY FORM



AUBURN UNIVERSITY

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.