

## Columbus State University Student Field Trip & Travel Approval Form

Activity:			
Departure Date:		Return Date:	
Destination:			
Purpose:			
Trip Leader:		Mobile Phone:	
Emergency Leader:		Mobile Phone:	
Number in Group:			
Mode of Transportation:	Personal Vehicle(s)	CSU Vehicle	

If using a personal vehicle to transport students, please complete the following:

Name of Driver	Vehicle License Number	Insurance Company	Policy Number	Expiration Date

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### Signature Approvals

\_\_\_\_\_

Trip Leader or Sponsor

\_\_\_\_\_

Date

\_\_\_\_\_

Activity Supervisor [or Academic Department Chair]

\_\_\_\_\_

Date

\_\_\_\_\_

Assistant VP Student Affairs [or Academic Dean]

\_\_\_\_\_

Date

Attach Appropriate Forms:

\_\_\_\_\_ Itinerary

\_\_\_\_\_ Roster

\*Waivers must be uploaded into the Travel Document Repository available at  
<https://www.columbusstate.edu/academic-affairs/student-travel-procedures.php>