#### AP 4300 Field Trips and Excursions

References: Government Code Section 11139.8; Title 5 Section 55220

At the request of faculty, administration, or staff, the District may approve field trips and excursions in connection with courses of instruction or college-related social, educational, cultural, athletic, or musical activities to and from places in California, or any other states, the District of Columbia, or a foreign country for students.

Field trips and excursions incurring expenses that exceed \$5,000 per student group travel, or exceed \$1,500 for individual student travel or any travel outside of the contiguous United States must be submitted to the Board of Trustees for pre-approval.

If travel is to and from a foreign country, the liability insurance shall be secured by a carrier licensed to transact insurance business in the foreign country.

The District may reimburse the expenses of instructors, designated chaperones, and other personnel participating in a field trip or excursion. Reimbursement shall be completed through the standard District travel and reimbursement approval process provided by the District Business Office.

No student shall be prevented from participating in a field trip or excursion which is integral to the completion of a course because of lack of sufficient funds. The District employee requesting the field trip shall organize efforts to provide funds for these students.

Expenses of students participating in a field trip or excursion may not be paid with public funds, except where auxiliary, grant, or categorical programs permit the use of such funds, consistent with the requirements of the funding source

During the field trip itself, the District employee who is designated as chaperone shall comply with all District policies and procedures and shall be responsible for students, who shall comply with all college policies and regulations, including those related to Student Conduct per BP 5500.

If the field trip requires overnight stays, the responsibility constitutes a twenty-four-hour commitment, including all scheduled and unscheduled activities. All accompanying faculty, staff, and designated chaperones must complete all required training for district employees and additional training for Title IX regulations.

At least one week before the activity, all field trip or excursion participants must submit all completed District Field Trip waivers and forms. All persons making a field trip or excursion shall be deemed to have waived all claims against the State of California and the District for injury, accident, illness, or death occurring during or by reason of the field trip or excursion. All adults

taking such trips and all parents or guardians of minor students shall sign a statement waiving such claims.

The attendance or participation of a student in a field trip or excursion authorized by the District may be claimed for apportionment to the extent that the field trip or excursion is part of a course. However, attendance claimed for apportionment as a result of a field trip or excursion shall be limited to the amount of attendance that would have accrued during instruction had the students not been engaged in the field trip or excursion. No more contact hours shall be generated by a field trip or excursion than if the class were to meet as regularly scheduled.

District employees who plan to participate in a field trip should follow current processes for Travel Approval, use of district vehicles, and/or reimbursement of travel expenses.

The instructor/advisor designated as chaperone for the trip/excursion must submit the following forms:

- 1) Field Trip/Excursion Notice (to be signed by all participants)
- Field Trip/Excursion Request (to be submitted by instructor/advisor to the area dean or director)
- 3) Voluntary Activity Waiver, Release & Indemnity Agreement (to be signed by all participants)
- 4) Student Emergency Medical Authorization/Student Transportation Acknowledgement & Release (to be completed by all participants)

#### 1. For All Trips and Excursions:

- a. Instructor/advisor must submit a request for a Field Trip/Excursion and all related forms. Allow at least 2 weeks in advance.
- b. Approval of the dean/director, area vice president, and Chief Business Officer is required as indicated by signatures on the Field Trip/Excursion Request at least 5 days in advance.
- c. Written approval of the superintendent/president or Board of Trustees is required for trips or excursions incurring expenses that exceed \$1,500 for individual student travel, or \$5,000 for student group travel, or any travel out of the state.
- d. The supervising instructor or staff member designated as chaperone is required to accompany the participants throughout the field trip or excursion.
- e. The supervising instructor or staff member designated as chaperone is required to provide an updated list of participants to the area vice president on the day of departure and to carry one set of Student Emergency Medical Authorization/ Student Transportation Acknowledgement & Release forms during the trip.

#### 2. Instructional Field Trips and College-Sponsored Activities

- a. Courses which require student participation in instructional trips shall be identified in the Schedule of Classes.
- b. Content and purpose of both optional and required field trips and excursions must support course objectives as stated in the course syllabus.
- c. Alternative activities must be provided for students who cannot participate in a required field trip.

3.	Non-instructional travel for individuals on behalf of Associated Students, Student Athletics
	non-instructional programs and clubs

a. Authorized students traveling on behalf of Associated Students, College athletics, non-instructional programs, or a district-recognized club will submit the same forms and comply with all district policies as outlined for instructional field trips/excursions.

Approved by the Superintendent/President: March 8, 2024

See Board Policy 4300



### FIELD TRIP RISK TRANSFER FORMS

#### **COLLEGE FIELD TRIP RISK TRANSFER FORMS**

- 1. FIELD TRIP/EXCURSION NOTICE to be signed by all participants
- 2. FIELD TRIP/EXCURSION REQUEST to be submitted by instructor/advisor to Area Dean
- 3. VOLUNTARY ACTIVITY WAIVER, RELEASE & INDEMNITY AGREEMENT *to be signed by all participants*
- 4. PERSONAL VEHICLE USE

#### FIELD TRIP/EXCURSION NOTICE

(to be signed by all participants)

Field Trip	Field Trip	
Date:	Start Time:	End Time:
Eigld Trip /Expression / F	Nostination:	
rieid Tiip/Excuisioii/ E	Destination:	
Inclusive Dates and Desi	tinations, if Notice is to be ap	plied to more than one event:
	T	r
Instructor/Advisor		
Einst Name Last Name		
THE TRAINE, Last Traine:		

I understand that pursuant to the California Code of Regulations, Subchapter 5, Section 55450, by participating in the field trip(s)/excursion(s), I am deemed by law to have waived any claims against Hartnell Community College District for injury, accident, illness or death occurring during or by reason of the field trip/excursion.

I understand that during the field trip itself, I am required to comply with all District policies and procedures, including those related to Student Conduct per BP 5500.

I have no known medical condition(s) which may pose a risk to the health and safety of me or others by participating in the activity(ies). I agree to advise the District in writing of any medical, physical or health condition which may be affected or in any way jeopardized by participating in a specific field trip/excursion.

In the event of an accident or illness please no	tify:
First Name	Last Name:
Address:	Phone:
Relationship to Participant:	
providing transportation and it is my responsi- activity. If the district is providing transportation	nless specifically advised otherwise, the district is not bility to arrange for my transportation to and from the on but I do not use the transportation, I am responsible assumes no responsibility or liability of any kind.
If the district is not providing the transportation	on, I further understand:
<ul> <li>driving on behalf or as an agent of the driving record of the driver, the liability the vehicle;</li> <li>the district is in no way responsible, no or loss which may result from my transplantation.</li> <li>although the district may assist in coor</li> </ul>	dinating the transportation and/or recommend aravanning, the recommendation(s) or travel
Name (Print)	
Signature	Date

FIELD TRIP/EXCURSION REQUEST
TO BE SUBMITTED BY INSTRUCTOR/ADVISOR TO AREA DEAN

Instructor/Advisor:		
Designated Chaperone:		
Class (Name/Number/Section):		
Or Club:		
Activity(ies)/Destination(s)	Departure Date	Return Date
Describe the objectives of the proposed content or objectives. Activities must be syllabus.	activity (ies) and how they re	* U
Participation form(s) to be signed by each  Field Trip/Excursion Notice  Acknowledgment & Assumption  Voluntary Activity Waiver, Release  Student Emergency Medical Autl	of Potential Risk se & Indemnity Agreement horization/Student Transporta	ntion Acknowledgment & Rele
NOTE: One set of waivers and emerg than one event. Inclusive dates for all e Waiver.	gency medical forms may be s	

Transportation (Check one)  To be provided by the district
Responsibility of participants
If this activity meets a course requirement, please describe the alternative assignment or activity that has been provided for students who cannot attend.
I understand per BP 4300 that I am voluntarily engaged as necessary to chaperone a field trip or excursion over and above the normal period for which I am employed by the District, and that during the field trip itself, I shall comply with all District policies and procedures, and shall be responsible for students, who shall comply with all college policies and regulations, including those related to Student Conduct per BP 5500.
Permission is requested to conduct the above-listed voluntary activity(ies), involving the students indicated on the attached roster, away from a Hartnell College campus site.
Attached is a completed and signed set of forms for each student on the roster.
Field Trip/Excursion Notice Form
Voluntary Activity Waiver, Release & Indemnity Agreement,
Student Emergency Medical Authorization/Transportation Acknowledgement
Requested By: Date:
Instructor Advisor as Designated Chaperone
Division or Program:
Approved By: Date:
Area Dean
***************************************

APPROVED	REJECTED	<u> </u>
REASON:		_
BY (Print):		-
Area Vice President		
BY (Signature):		DATE:
Vice President of Administrative Service	ces or Designee	
NOTE:		
The instructor or advisor designated as completed form to the area dean at least		

California.

Per BP 4300, field trips or excursions outside of the State of California require prior approval of the

Per BP 4300, field trips or excursions outside of the contiguous United States require prior approval of the Superintendent/President and the Board of Trustees.

Superintendent/President.

## VOLUNTARY ACTIVITY WAIVER, RELEASE & INDEMNITY AGREEMENT

#### TO BE SIGNED BY ALL PARTICIPANTS

For and in consideration of permitting(Pa	rticipant)	_ to enroll in and participate in
(activity) and class ins	truction of	(class or program)
given by Hartnell Community College (hereafter	, "District") in the Ci	ity of Salinas, County of
Monterey, State of California, beginning on the hereby voluntarily releases, discharges, waives and for personal injury, property damage or wrongful engaging or receiving instructions in said active however the same may occur and continue, and executors, administrators and assigns hereby releauses of action, aforesaid, which may hereafter at that under no circumstances will he/she or hiprosecute, present any claim for personal injury, or any of its officers, agents or employees for any by the negligence of any of said persons, or other	d relinquishes any and death occurring to heath occurring to heaty or any activities in the undersigned does ease, waive, discharge ise for him/herself and sher heirs, executed property damage or of said causes of activities.	d all actions or causes of action him/herself arising as a result of incidental thereto wherever or for him/herself, his/her heirs, ge and relinquish any action or and for his/her estate, and agrees ors, administrators and assigns wrongful death against District
It is the intention of the <b>Participant</b> by this included liability for personal injury, property damage.		
The undersigned, for him/herself, his/her heirs, the event any claim for personal injury, property of District, he/she shall indemnify and save harmles action by whomever or wherever made or prowrongful death.	lamage or wrongful d s the same District fr	eath shall be prosecuted against com any and claims or causes of
The undersigned acknowledges that he/she has r foregoing three (3) paragraphs, has been fully incidental to engaging in the activity and instructions consequences of signing the within instrument.	and completely adv	vised of the potential dangers
Signature (Participant)		Date
Printed Name	<u></u>	

For Participants under the age of 18:		
Signature of Parent/Guardian on behalf of Participant	Date	
Printed Name		
Signature (Witness)	Date	
Printed Name		

# (This additional form may not be required, depending on current travel guidelines from Business Office) HARTNELL COMMUNITY COLLEGE DISTRICT

#### PERSONAL VEHICLE USE

Name:	Phone	
DOB:		
Driver's License #:	Exp. Date:	
Year/Make of Auto:	Vehicle License #:	
Insurance Carrier:	Phone:	
Liability Limits:	Policy #:	
Expiration Date:	<u> </u>	
while driving my personal ve coverage and a valid driver'	ormation is correct and that the insurance coverage is in force. I whicle in the course of my duties with the district that I must have be a license as required by the State of California. I agree to advise above information. I further certify that the above vehicle is more above.	iability insurance se the district, in
your liability insurance polic	automobile while on district business and you are involved in an a cy is used first. The district liability coverage would be used only istrict does not provide comprehensive or collision coverage to y	after your limits
transport only authorized pe	ict business will: (1) follow the most direct route; (2) avoid unnecersons, no guests; (4) transport no more than 9 students, no ma all vehicle occupants use seat belts if available in the vehicle	
company that indicates expir	e following: (1) "Proof of Insurance" provided by your auton ration date of insurance, and (2) driver's license. The district may fornia Department of Motor Vehicles.	
Signed	Date	
Site	Purpose	
Approval	Date	