SOUTHWESTERN UNIVERSITY

University Sponsored Student Travel Checklist

This Travel Checklist is to be utilized for all sponsored/funded student trips. This form must be completed and submitted to the Director of the sponsoring/funding department at least 5 business days prior to departure for Southwestern University to officially recognize your activity.

Date Submitted Organization Date(s) of event Method of Travel Site Phone # Depart: Day Date Trip Leader(s) and Mobile Phone	Even Destin Dista Site Contact 1	nationnation			
Date(s) of event Method of Travel Site Phone # Depart: Day Date	Desting Desting Desting Dista	nation nce from SU			
Method of Travel Site Phone # Depart: Day Date	Dista Site Contact 1	nce from SU			
Site Phone # Date	Site Contact 1				
Depart: Day Date		Person			
	Time Return: I	Site Contact Person			
Trip Leader(s) and Mobile Phone		Day Date	Time		
	e #(s) - (include all drivers)				
 Will a(n) SU vehicle(s) be used for th Will a(n) Enterprise vehicles be used at Will one or more private vehicles be used at Have all drivers completed the Univer Are all drivers authorized by SUPD (g Will any travel by car/van occur at nig 	for the trip? Yes No used for the trip? Yes No rsity's Van Driver/Vehicle Safety per SU's driver record review pro		Ío		
 How many vehicles will travel togethe Have all traveling students been infort traveling outside of the travel plans lis Have all passengers been notified that Have all drivers been notified that the Have all trip participants been notified beverages on University sponsored trip Have all drivers been notified to stop Have all drivers been notified that the Have all drivers been encouraged to contact the 	med of the departmental policies sted on this form? Yes No they must wear seat belts while by should never pick up any addition that the transportation and/or coips is not allowed? Yes No every 2-3 hours for a break of at a travel limit for SU student organ	vehicle(s) is moving? Yes onal passengers? Yes No nsumption of drugs or alc least 15 minutes outside thizations is 6 hours of driving of driving of the second of the seco	s No coholic he vehicle? Yes No		
 If using private vehicles, does departn If using private vehicles, provide the or 			nield sticker of TX vehicles)		
Owner of Vehicle	License Plate #	Inspection Due	e Date		

Additional questions for Sport Club Trips Sponsored by SIRA:

- Has the Sport Club's first aid kit been checked for completeness? Yes No
- Does the first aid kit include emergency information and medical history forms for everyone? Yes No

Lodging InformationIf spending the night, list overnight lodging place for each night:

Place	Address	Phone #	
Place	Address	Phone #	
traveling on the traveling on the travel. Notes: #1 - Stude Waiver at least 4 travel plans with #2 - All students	rder, please list all studen rip. Please designate thos esignate those who wish t ents traveling separately f 8 hours prior to departur SU staff member receiving	ts, faculty, staff, advisors and/or other Universe who plan to drive by placing an asterisk '* to travel outside of this plan by circling the plan the group will need to submit an Alternate. A student who submits a Travel Waiver nay this form before the Travel Waiver can be led a Pre-Trip Agreement (as a Google Form	"next to the person's name. ate Travel must discuss their approved.
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10		_20	
Below This Line For Please forward a con	Office Use Only by of this completed form to fo	ollowing offices:	
Dean of Students (A		Department Chair (Travel Sponsored by Academic Dep	artments only)
SUPD (Always Re		Provost (Travel Sponsored by Academic Departments only)	
Contact Information fo	or Sponsoring SU Department:		
Dept:	Dept. Contact:	Contact Phone:	
Clery Act Checklist – V	Were SU funds used for trip?	Did students spend one or more nights?	
If yes to both questions	s, then insert date Clery Google Fo	orm was completed R	evised August 2019