



FIELD TRIP REQUEST & APPROVAL FORM (DOMESTIC)

FIELD TRIP LEADER CONTACT INFORMATION

Field Trip Leader:

Date:

Cell Phone:

Email:

INITIAL INFORMATION

Course/Program Name:

Emergency/On Campus
Contact:

Destination:

Departure Date:

Return Date:

TOTAL NUMBER OF TRAVELERS & TRAVELER NAMES

Faculty/Staff:

Students:

Resource Person(s) & Description of Role:
(Must be approved by Dean/Director/Manager)Total Number of
Participants:

ITINERARY

Please include a brief description of the proposed trip including purpose and locations.

Attachment A

FUNDING

Budget Code:

Cost Estimate
(per person):Cost Estimate
Total:All Funding Sources:
(Tuition, student fees,
Campus Alberta funding etc.)**RISK ASSESSMENT – To be completed by the field trip leader**

Hazards Identified	Steps to be Taken to Mitigate Identified Hazards
1.	
2.	
3.	
4.	

FIELD TRIP LEADER: I hereby request support in principle for this travel.

Signature:

Date:

TO BE COMPLETED BY DEAN/DIRECTOR/MANAGER**FILL IN YOUR SCORE BELOW IN THE BLANK FIELD BOXES**

Likelihood of Exposure to Hazard				Consequence of Exposure to Hazard			
Score	Likelihood	Meaning		Score	Likelihood	Meaning	
1	Unlikely/ rare	Not likely to encounter the hazard on the field trip, but could occur under exceptional circumstances.		1	Minor	Hazards identified have potential to cause minor property damage or a first aid injury.	
2	Likely/ possible	Likely or possible to be exposed to the hazard during the field trip.		2	Moderate	Hazards identified have potential to cause moderate property damage or an injury requiring off-site medical care or lost time days.	
3	Almost certain	It is expected to be exposed to the hazard during the field trip.		3	Serious	Hazards identified have potential to cause major property damage or potential fatal or disabling injury.	

TOTAL SCORE NUMBERS TOGETHER**Locate the number from the Risk Matrix key below to determine the level of risk the identified hazard presents**

Risk Matrix		
Score	Level Of Risk	Response
5 – 6	High	Further controls are needed. Field trip hazard assessment form must be completed.
3 – 4	Medium	Stop & reassess for additional controls – Management discretion to complete full hazard assessment.
2	Low	Low risk – risk has been reduced as low as possible.

APPROVAL – I authorize the requested Field Trip in accordance with the field trip policy.

Dean/Director/Manager Signature:		Date:
Printed Name:		Date:
<input type="checkbox"/> Complete Hazard Assessment on pg. 3	<input type="checkbox"/> Complete Emergency Response Plan on pg. 4	<input type="checkbox"/> Submit a complete list of participants and cell numbers

Distribution When Approved:

Field Trip Leader

Approving Dean, Director, Manager

Director Financial Services

Attachment A

HAZARD ASSESSMENT

To be completed by the field trip leader, only if required by the risk assessment on page 2

Activity Hazards	Steps to be Taken to Mitigate Identified Risks
<input type="checkbox"/> Strenuous physical activity	
<input type="checkbox"/> Use of mechanical equipment	
<input type="checkbox"/> Driving a vehicle	
<input type="checkbox"/> Driving a vehicle, off-road	
<input type="checkbox"/> Use of chemicals	
<input type="checkbox"/> Noise exposure	
Health Hazard	
<input type="checkbox"/> Work may exacerbate pre-existing health concerns	
<input type="checkbox"/> Potential for allergic reaction	
<input type="checkbox"/> Dehydration	
Weather Hazard	
<input type="checkbox"/> Sun/UV exposure	
<input type="checkbox"/> Extreme heat	
<input type="checkbox"/> Extreme cold	
<input type="checkbox"/> Being outside during a storm	
<input type="checkbox"/> Other (indicate)	
Field Site Hazard	
<input type="checkbox"/> Hiking over uneven terrain	
<input type="checkbox"/> Personal security	
<input type="checkbox"/> Travel to private property	
<input type="checkbox"/> Animal encounter	
<input type="checkbox"/> Poisonous plants encounter	
<input type="checkbox"/> Camping outdoors	
<input type="checkbox"/> Proximity, crossing, or entering a body of water	
<input type="checkbox"/> Limited access to potable drinking water and appropriate food storage	
<input type="checkbox"/> Work near a road	
<input type="checkbox"/> Use of fire	
<input type="checkbox"/> Limited access to reliable means of communication	
<input type="checkbox"/> Other (indicate)	
<input type="checkbox"/> Other (indicate)	
HAZARD ASSESSMENT COMPLETED BY (PLEASE PRINT)	
Name:	
Date completed:	

FIELD TRIP REQUEST & APPROVAL FORM (DOMESTIC)**Emergency Response Plan** – If required (i.e. Out of town/overnight trips)**On-Scene Student Expectations** – Describes what the role of the student response should entail.

Example: Students are expected to follow instructions from the instructor or emergency services. Students are expected to stay at the scene unless otherwise dismissed by the instructor or emergency services.

Emergency Communication Instructions - Should include the means, conditions, and order in which to call emergency contacts.

Example: The field trip leader will use personal cell phone to call 911 to manage the crisis. After the emergency services handle the crisis, the instructor will contact the MHC emergency contact, to inform them of situation. The MHC emergency contact will then contact the student's emergency contact and appropriate MHC offices regarding the incident.

Assembly Points - Are designated meeting points in case of emergency or separation. The location of the assembly point may vary due to the situation and access to means of communication, so you may have multiple assembly points for various incidents.

Example: end of road by large tree, hotel (address).

First Aid Kit Location

Example: Field Trip Leader backpack

First Aid Training – Determined by level of risk of injury. Document persons that have first aid certification.

Example: Field Trip Leader Standard First Aid CPR/AED Level C or Not Required

Situational Response Instructions - Should describe how the response should be conducted.

Situation	Response
First Aid	Example: Have one student notify the instructor of injury/incident while another student stays with the injured student. The instructor will provide basic first aid using the provided first aid kit. If the injury exceeds the capacity of the first aid kit or the training of the instructor, the instructor will call emergency services (911). The instructor should have students stop the field trip activities and gather at rally point (parking lot where department vans are located).
Medical Emergency	
Missing Person	
Vehicle Accident/Break Down	
Other	

This document should be used to communicate the hazards and required safety measures prior to travel or as soon as arrival at location. A copy should be provided to the MHC emergency contract prior to departure, along with a list of attendees and their cell phone number. The field trip leader should have a copy of both documents with them.

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