

**TEXAS WESLEYAN UNIVERSITY  
FACULTY/SUPERVISOR TRIP/ACTIVITY APPROVAL REQUEST/CHECKLIST**

**I am hereby requesting approval for my participation in and/or supervision of the program, activity, project, trip, or study described below. This request is within the scope of my employment.**

**Faculty Member:** \_\_\_\_\_  
\_\_\_\_\_  
**Name of Program, etc.:** \_\_\_\_\_  
\_\_\_\_\_  
**Dates of Program:** \_\_\_\_\_  
\_\_\_\_\_  
**Location of Program:** \_\_\_\_\_

**In connection with this program, I agree to see that the following information is provided and the procedures described below are followed:**

- 1. I will see that the administration is provided with information on all aspects of the program and grants approval.**
- 2. I will see that the responsible party receives adequate information regarding any travel agency and/or others organizing any tour, study, or project and that approval is granted for use of that organization.**
- 3. I will see that the tour organizers, sponsors, or operators promise to indemnify Texas Wesleyan University against loss, and provide contractual evidence of same, as well as, confirmation that they maintain general liability, professional liability, and auto liability (if applicable) for a minimum of \$1,000,000. Furthermore, I will obtain certificates of insurance verifying coverage.**
- 4. I will see that each participant on the program, activity, project, trip, or study executes a waiver of liability that includes an awareness/acknowledgement of risk and an emergency notification form, copies of which will be turned over to the appropriate administrator/supervisor at least seven (7) days before the program, activity, project, trip, or study occurs, to the extent practicable.**
- 5. I will see that all participants are provided with orientation on hotel safety, if applicable, and emergency notification procedures before we depart.**
- 6. I will see that all planned drivers on the trip, if applicable, are approved before departure. A list of drivers will accompany this form. The list will include the person's name, driver's license number, and insurance carrier. If any driving is to be done outside the U.S., each driver must be over 25 years of age and licensed in the country in question.**

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**If students are using their personal vehicles, they will also be required to sign a risk acknowledgement form. The condition of vehicles will be evaluated and any questionable items repaired or the vehicle will not be used.**

**7. During the trip, I will endeavor to assure the following: seat belts are worn, no hitchhikers are picked up, bus companies chartered are reputable, and that campus policies and rules regarding student behavior are adhered to and enforced.**

**8. In the event of an emergency, I will contact appropriate University officials. If it is necessary for someone to accompany a student home, I will designate such a person and will continue as the supervisor on the trip or activity.**

**9. A proposed itinerary listing locations, addresses, and phone numbers for overnight accommodations will accompany this form, if applicable.**

**Name of Faculty or Supervisor: \_\_\_\_\_**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**Name of Supervisor Approving Trip or Activity: \_\_\_\_\_**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**