

**Attachment A**

**REQUEST FOR AUTHORIZATION**

**THE COLLEGE OF NEW JERSEY - STUDENT TRAVEL ON FIELD TRIPS**

**Part I. Requestor/Sponsor Information**

Name of College Employee Responsible for Trip: \_\_\_\_\_

Position /Title : \_\_\_\_\_

Administrative Unit/Organization (include Department): \_\_\_\_\_

Phones: Office \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**Part II. Event/Trip Information**

Purpose of Trip: \_\_\_\_\_

Destination : \_\_\_\_\_

Dates of Travel: Departure \_\_\_\_\_ Return \_\_\_\_\_

Total Number of Participants: \_\_\_\_\_ Number of Non-Student Participants: \_\_\_\_\_

Lodging Arrangements, if applicable: Address and Phone Number Required

\_\_\_\_\_ Phone ( ) \_\_\_\_\_

Transportation Arrangements:

Vehicle: \_\_\_\_ Rental Car \_\_\_\_ Personal Car \_\_\_\_\_ Van \_\_\_\_ TCNJ Owned/Leased  
Vehicle (circle one)

Common Carrier \_\_\_\_\_

Name(s) of Drivers: \_\_\_\_\_

Name of College Employee Available for Contact in Event of Emergency: \_\_\_\_\_

Phones: Office \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

**Part III. Travel Risks**

Required Information/Documents:

List and describe any travel risks associated with this Event: (e.g., geopolitical, crime, recreational activities, physical exertion, weather or environmental)

**Part IV. Appropriate Administrator Approval**

Required Information/Documents, if applicable:

\_\_\_\_\_ List of All Participants/Emergency Contacts

Approval Signature \_\_\_\_\_

Title: Dean, Humanities and Social Sciences \_\_\_\_\_

Date \_\_\_\_\_