ALABAMA A&M UNIVERSITY
GUIDELINES FOR STUDENT TRAVEL

This document applies to the travel of enrolled undergraduate and graduate students to attend activities or events that are organized and/or sponsored by Alabama Agricultural and Mechanical University, herein referred to as the “University.” Its purpose is to provide procedures which promote student safety, minimize University risk, and improve accountability.

Statement

All enrolled undergraduate or graduate students who travel to and from activities and/or events that are within the scope of this document must comply with the University policies and practices for safe student travel. In addition to using sound judgement and following the federal and state laws that encourage safe travel, students traveling to and from University-organized and sponsored activities or events may be required to use various modes of travel as well as meet certain conditions. Each form of travel requires the student to follow particular safety precautions.

Scope

This document applies to student travel associated with representing the University in athletic or academic competitions, any travel of students sponsored by the University, any travel utilizing a vehicle owned or leased by the University, some student travel in connection with academic courses, including international travel, and some travel associated with student organizations. This document only applies to travel that includes a destination that is more than thirty (30) miles from the University’s campus located at 4900 Meridian Street North in Normal, Alabama.

This document does not extend to organized events where the University lacks any supervisory control. For example, this document would apply to academic field trips which are chaperoned by a faculty member, but it does not apply to student-athletes traveling to competitions in which they represent the University, unless the travel for the event also meets the definition of a sponsored event. All sponsored events are within the scope of this document. International student travel in connection with a University academic program is included in this document, although other policies may also apply to travel abroad.

Definitions

An organized event is one that is initiated, planned, and arranged by a member of the University’s faculty or staff, or by the members of a recognized student organization, and it is also formally approved by an appropriate administrator of the University acting within his or her assigned employment duties. Organized events in which the University lacks supervisory control and which are organized by an organization independent from the University are not covered by this document.

A sponsored event or activity is one that the University endorses by supporting it financially, and/or by sending one or more students to participate in it primarily as an official representative of the University.
An enrolled student is one who has been admitted to and is attending classes at the University, either in person or on-line.

An appropriate administrator is a vice president, dean, department chair, or director/coordinator of an administrative unit, or their designee, who has actual authority to provide authorization.

A recognized student organization is one that is acknowledged by the Office of Student Activities and Leadership Development. Such organizations are separate entities from the University.

Expectations

Students are representatives of Alabama A&M University whenever they participate in an off-campus activity that is funded fully or in part by the institution. As such, the students’ behavior at off-campus activities is reflective of the University and therefore, it is the expectation of the University that the students recognize this and conduct themselves appropriately. Students should maintain an environment that sustains the educational goals of the travel as well as respect the security and property of individuals and the University. Students must adhere to the University’s Code of Conduct at all sponsored events as well as the laws and policies of the facility, university, or country to which they have traveled.

Student Responsibility

Any student conduct while engaged in travel or at the destination which results in additional costs will be at the student’s sole expense. Neither the University nor any employee of the University, including chaperones, is responsible for providing expenses or costs, including legal assistance or bail, arising from a student being detained by proper authorities. Individuals evicted from their place of lodging are personally responsible for obtaining alternative lodging for themselves at their own expense. Any damage by a student to a student’s lodging is the direct responsibility of the student and not the University. If damage occurs to a room, the student or students assigned to the room will provide payment arising from the damage.

When transportation is provided by the University, any student whose actions cause an unreasonable risk of injury to himself, others, or property, as determined by the University, may lose the privilege of being afforded such travel by the University. If the University makes this determination, the student will become responsible for securing his or her alternative travel arrangements at no expense to the University, regardless of any inconvenience. However, students who lose their travel privilege due to misconduct will not be left stranded in any area in which there is a foreseeable risk of physical harm to that student.

Insurance

Outside of the current student health insurance, the University will not have an insurance policy in place that covers all types of harm that may occur to all students while traveling, and students should therefore not rely on the University providing insurance. Therefore, all student travelers are strongly encouraged to secure additional private insurance.
All motor vehicle insurance for students is the responsibility of the individual and not the University.

**Funding Approval**

University sponsored student travel expenses may, in many but not all instances, be paid for by the University. Requests for funding should be handled by the student advisor and, when appropriate, a program director or the administrator over the account from which funds will be expended.

Funding should be requested at least 30 days or more prior to the date of departure and processed through the appropriate channels of authority. For example, Study Abroad requests would be channeled through the faculty member, department chair, dean, and vice president, in consultation with the Study Abroad office. Student Government Association requests would be channeled through procedures outlined in the SGA constitution. Funding is not guaranteed and students are responsible for submitting all requests timely.

If hotel or airline services are required, the staff/faculty advisor should make the arrangements will in advance, and the appropriate administrator will authorize check requests, purchase orders, and/or other necessary documents. Only University-approved travel agencies may be used.

**Travel Authorization**

In order to ensure that the events or activities that involve student travel are within the scope of the University’s mission and public purpose, travel undertaken pursuant to this document must be authorized in advance by an appropriate administrator. The following applies to the purpose:

1. To request authorization, individual students and/or students who are members of recognized student organizations who organize activities covered by this document, must submit a completed Student Travel Request for Authorization Form ("STRA Form") with the appropriate completed documents attached (the "Travel Packet") to the Office of the Vice President for Student Affairs. Whenever, possible, Travel Packets should be submitted **at least 30 days prior** to the activity or event.

Travel Packets should include:

1. One completed STRA Form with all appropriate administrative approval signatures at the bottom.

   - The one completed STRA Form will suffice as the STRA Form for all participating students. To reiterate, only one completed STRA Form is needed per trip. Once the STRA Form has been signed by the VP for Student Affairs, a signed copy will be returned to you for your records.
(2) One travel roster to include:

- A list of student travelers, including their
  - Names,
  - A-Numbers
  - Local addresses and
  - Phone numbers, as well as the
  - Names and phone numbers of persons to contact in case of an emergency;
- The name(s), A-Number, and phone number for the responsible University employee(s) who will be available to the students at all reasonable times during the travel and activity;
- Statement at the bottom of the roster confirming that each participating student’s enrollment for the applicable semester has been verified and confirmed.

(3) Release, Waiver, Indemnity Agreement, Covenant not to Sue (the “Release Form”) completed and signed by each participating student. Please keep copies for your records:

(4) Student Authorization for Emergency Medical Treatment (the “Emergency Medical Form”) completed and signed by each participating student. Please keep copies for your records; and

(5) Trip itinerary (one for the entire group).

The STRA, Release and Emergency Medical Forms are available from the Office of the Vice President for Student Affairs. Writeable versions of the forms may be electronically accessed from the Office of Students Affairs’ webpage via the University’s website: www.aamu.edu.

On the University’s Homepage...
Scroll down to the bottom of the page.
Under the Resources For column: Click <Current Students
Under the Services column: Click <Student Affairs; Click <Forms and Resources:
Click on form needed

Reminder: Please keep for your records, copies of all Travel Packet documents provided to the Office of Student Affairs, as the only document that will be returned to your office will be the Student Travel Request for Authorization Form (one page) after it has been signed by the Vice President for Student Affairs.

Attachments:

(1) Student Travel Request for Authorization (STRA Form)
(2) Release, Waiver, Indemnity Agreement – Covenant Not to Sue (Release Form)
(3) Student Authorization for Emergency Medical Treatment (Emergency Medical Form)
Alabama A&M University
Student Travel Request for Authorization

Part I. Requestor/Sponsor/Organization Information
Name of University Faculty/Staff Member Responsible for Trip: _______________________
Position/Title: ___________________________________________________________________
Administrative Unit/Organization: ___________________________________________________________________
Phones: Office ____________ Cell ____________ Email ___________________________________________________________________

Part II. Student Information
Please attach a roster with A#, name, address, phone number(s), email address, and
emergency contact information for each participant.

Part III. Travel Information
Reason for Travel: ___________________________________________________________________
Destination: _________________________________________________________________________
Dates of Travel: Departure: ______________ Return: _________________________
Total Number of Participants: _______ Attach list of Names for group activity only
Transportation Arrangements (Check one):
Vehicle: _____ Rental Car _____ Personal Car _____ University-Owned Vehicle _____
Common Carrier ______
Name(s) of Drivers: _______________________________________________________________

Lodging Arrangements (Address and Phone Number Required): _________________________

Phone: _________________________________________________________________________

Part IV. Required Information/Documents:
  _____ List of All Participants/Emergency Contacts (Attached)
  _____ Release, Waiver, Indemnification Agreement, Covenant Not To Sue
  _____ Student Travel Request for Authorization
  _____ Student Authorization for Emergency Medical Treatment

Name of University Employee Not Traveling Available for Contact in the Case of
Emergency: ___________________________ Contact Number: ____________________________

Part V. Administrative Approval
Sponsor Signature/Title/Date: _______________________________________________________
Department Chair Signature/Date: ___________________________________________________
Academic Dean Signature/Date: ____________________________________________________
Vice President for Student Affairs Signature/Date: ___________________________________
RELEASE, WAIVER, INDEMNITY AGREEMENT,  
COVENANT NOT TO SUE  

THIS RELEASE, WAIVER, INDEMNITY AGREEMENT, AND COVENANT NOT TO SUE is executed on the ___ day of ________________, 20___.

In consideration of my participation in the AAMU Office of ______________________ (the “Event”) and other good and valuable consideration, I hereby agree, release and covenant as follows:

1. With full knowledge and appreciation of the risks associated with participating in the Event, I acknowledge that I am voluntarily participating in the Event and that I VOLUNTARILY, KNOWINGLY AND FREELY ASSUME ALL RISKS ASSOCIATED WITH SUCH PARTICIPATION, known or unknown, anticipated or unanticipated, including the risk of negligence by persons or entities involved with the Event.

2. I hereby RELEASE, WAIVE, DISCHARGE, and COVENANT NOT TO SUE the state of Alabama, AAMU, its Board of Trustees, their successors, affiliates, agents, officers, directors, employees, representatives, and volunteers (collectively hereinafter, the “Releasees”), jointly and severally, from and/or for any and all liability to me, or my agents, heirs, executors, administrators, personal representatives, next of kin, attorneys, and assigns, FOR ANY AND ALL LOSSES, INJURIES OR DAMAGES, AND ANY CLAIMS OR DEMANDS THEREFOR, ON ACCOUNT OF, ARISING FROM OR RELATED TO, ANY INJURY OR DAMAGE TO MY PERSON, OR PROPERTY, INCLUDING DEATH, whether caused by or resulting from the negligence of the Releasees or otherwise, while I am observing or participating in the Event.

3. I expressly agree that the foregoing Release, Waiver, Indemnity Agreement, and Covenant Not to Sue is intended to be as broad and inclusive as is permitted by the laws of the State of Alabama, and that if any portion of it is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force and effect.

4. I have read, understand and voluntarily sign the RELEASE, WAIVER, INDEMNITY AGREEMENT, AND COVENANT NOT TO SUE intending to be bound thereby, and further acknowledge and agree that no oral representations, warranties, statements or inducements not contained in this written agreement have been made to me by any person or entity associated with the Event, including Releasees.

5. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A COVENANT NOT TO SUE, and have signed of my own free act and deed without coercion.

Signature: ____________________________ Date: __________

Printed Name: ____________________________

Street Address: (home) ____________________________

City, State, ZIP: (home) ____________________________

Telephone No.: (home) ____________________________
ALABAMA A&M UNIVERSITY
STUDENT AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

Name: ___________________________ A-Number: ______________________
Address: __________________________________________________________
Telephone Number: (Day) ___________________ (Evening) ______________________

Name of Nearest Relative (or guardian if student is under 18 years of age):
Address: __________________________________________________________
Telephone Number: (Day) ___________________ (Evening) ______________________

Physician’s Name: __________________________
Address: __________________________________________________________
Telephone Number: (Office) ___________________ (Emergency) ______________________
Dentist’s Name: __________________________
Address: __________________________________________________________
Telephone Number: (Day) ___________________ (Evening) ______________________
Health Insurance Company: __________________________
Policy Number: __________________________ Telephone Number: ______________________
Allergies: __________________________
Current Medications: __________________________
Special Health Needs: __________________________

EMERGENCY MEDICAL AUTHORIZATION
I, the undersigned, do hereby authorize Alabama A&M University and its agents or representatives to consent, on my behalf, to any medical/hospital care or treatment (including locations outside of the United States) to be rendered upon the advice of any licensed physician. I agree to be responsible for all necessary charges incurred by any hospitalization or treatment rendered pursuant to this authorization.
The effective dates of this authorization are ______________ to ______________.

Print Name (Student) __________________________ Signature __________________________ Date ______________

Print Name (Parent/Guardian if under 18 years) __________________________ Signature __________________________ Date ______________