

CALIFORNIA STATE UNIVERSITY, STANISLAUS - **ACADEMIC FIELD TRIP**  
**ADDITIONAL RISK INFORMATION**

Field Trip/Activity:	
Trip Location/Address:	
Trip Date:	Activity Time(s):
Instructor:	Department/Course:

**Information about Activity Risk**

This information is designed to make you aware of risks associated with traveling to/from and participating in this Field Trip, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. These injuries or outcomes may arise from your own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Field Trip location(s) or facilities. **You must assume all related risks, both known or unknown, of your participation in this Field Trip, including travel to, from and during the Field Trip.**

Use this space to list any other foreseeable risks (i.e. slipping/tripping on rugged terrain, exposure to natural elements including rodents, extreme weather, etc.)

**Standard of Conduct**

While participating in this Field Trip you must comply with the University's rules, standards, and instructions for student behavior as stated in the Student Code of Conduct in Title 5 California Code of Regulations §41301. You waive and release all claims against the University that arise at a time when you are not under the direct supervision of the University or that are caused by your failure to remain under such supervision or to comply with such rules, standards and instructions. You acknowledge and understand that any violation of the above standards of conduct, could lead to sanctions being imposed on you that are consistent with CSU Student Discipline Policies and Procedures, including but not limited to, suspension or expulsion from the University and/or program.

**Emergency Plans and Medical Consent**

If medical attention, beyond first-aid treatment, is required, you understand that an attempt will be made to contact the person whose information you have provided. If contact with that person is not made, **you give permission for medication attention to be administered.**

Use this space to describe emergency procedures while at the field location