## Middle Georgia State University **Student Travel Agreement**

This form must be completed and submitted each time a student travels (day or night) for participation in University sponsored student activities.

Name	_ MGA #	Cell Phone #	DOB
Emergency Contact Name		Phone #	Relationship
Purpose of Trip		Trip Destination	
Semester 🦳 Fall 🗌 Spring 🛄	Summer (Student	must be enrolled during the semester	of travel.) Trip Date(s)
Sponsoring Organization or Class		Trip Lea	ader/Advisor

## STUDENT ACKNOWLEDGEMENT

I understand that I must meet the Eligibility of Participation in the Student Life Activities Policies contained in the MGA Student Handbook, and I authorize a University official to confirm my eligibility. http://www.mga.edu/student-affairs/docs/MGA Student Handbook.pdf

I understand that while some costs for the travel activity may be prepaid, there may be some approved expenses (i.e. meals, taxi, etc.) that I must pay with personal funds. Reimbursements for any required personal expenses will be made with the approval of the trip advisor(s) and in accordance with the MGA policies, after the travel event. All reimbursements require a receipt of payment. I agree that, should I choose not to attend the activity, I will be responsible for repaying any related costs paid on my behalf by MGA.

I acknowledge that I have read and agree to abide by the Drug-Free Campus Policy contained in the MGA Student Handbook http://www.mga.edu/student-affairs/docs/MGA\_Student\_Handbook.pdf. I understand that violations occurring off campus will be treated the same as if the violation occurred on campus. Furthermore, I understand that I am traveling as a representative of MGA and that my conduct while traveling on University business is subject to the standards set forth in the MGA Code of Conduct.

I acknowledge that I have signed and attached to this form the Consent, Release, Waiver of Liability and Covenant Not to Sue http://www.mga.edu/student-life/docs/Forms/Travel/Liability Waiver.pdf

By signing below, I agree that as a participant in this school sponsored trip, my conduct will be appropriate for my role as a representative of the University, and I will be responsible for my own actions and well-being at all times.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit this completed/signed form along with the attached Waiver of Liability form to the advisor/leader for this trip. Trip advisor/leader will be responsible for submitting to their campus Student Life Representative prior to the trip departure.

Rev. June 2015