



Travel Checklist

YOUR CLUB/ORGANIZATION ROSTER MUST BE FILED PRIOR TO TRAVEL

- Consult with your Club/Organization's Student Development Advisor
- Consult with your faculty/staff advisor
- Complete Student Organization Travel Proposal (1)
- Complete Travel Funds Worksheet (2)
- Complete Extra Curricular Travel Form, *keep a copy for Trip Coordinator* (3)
- Have all participants complete and sign the Waiver for Participation (4)
- Have all participants sign the Travel Reimbursement Agreement (5)
- Secure lodging and registration with your Student Development Advisor
- Discuss transportation options with your Student Development Advisor
- Complete Transportation Reservation form, if needed (6)
 - *Provide copy of Driver's License*
 - *Complete Driver's License Disclosure*
 - *15 passenger van operators must complete an online training*
 - *If flying, provide names of participants as it appears on their identification and birth dates*
- Submit a Check Requisition for all checks to be processed
(available in Student Development)
- Obtain the Off Campus Travel Emergency Guide

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- ***Please allow 6-8 weeks to process travel request.***
 - ***A faculty/staff advisor is required to attend.***
 - ***Males and females are not allowed to share a room.***
 - ***Stockton vehicles are only allowed to be driven by paid College employees.***
 - ***Participation waivers and complete emergency contact information must be submitted prior to participation***
 - ***Students who are not yet 18 years of age must have a parent/guardian sign a waiver prior to participating in activities that require a waiver.***
 - ***Any vendor receiving a check for your trip must be registered in the Banner system. Paperwork and instructions are available in Student Development.***

Trip Coordinator Expectations

The Trip Coordinator may be a club member or a faculty/staff advisor. However, if the Trip Coordinator is a student, a faculty/staff member will also be required to attend.

- Meet with the club/organization's Student Development Advisor to discuss details of the trip and to determine his/her responsibilities in planning and implementing the travel plans.
- Meet with members participating in the trip to explain details and that all persons traveling will be subject to the policies of the college and are to conduct themselves in accordance with the Campus Code of Conduct.
- Review the **Off Campus Travel Emergency Guide** and follow guidelines to address emergencies, including reporting processes.
- Insure that all participants have completed and signed the **Waiver for Participation**.
- Insure that all participants have signed the **Travel Reimbursement Agreement** (*if applicable*).
- Maintain and keep a copy of the **Extra Curricular Travel Form** which contains a list of emergency contacts for each participant.
- Attend the trip to coordinate trip details.
- Retain all receipts for expenses occurred during travel and submit them to Student Development upon return.

Quick Tips

- Take advantage of conference early bird registration fees when possible
- Over estimate flight expenses as they change daily
- For local trips and when pool vehicles are not available, Stockton Auxiliary Services, Inc. (SASI), has a limited number of shuttle vehicles available at an hourly rate
- October/November and March/April are busy travel months so if your conference is during those times, schedule a meeting with your advisor as soon as possible.

*For any additional questions or concerns, see **Renee Tolliver** in the Student Development Resource Room or contact your club/organization's Student Development advisor.*



OFFICE OF STUDENT DEVELOPMENT
CLUB/ORGANIZATION
TRAVEL PROPOSAL

Date(s) of Trip: _____

Club/Organization: _____

Destination: _____

Trip Coordinator: _____

Below please give a brief description of the trip purpose, educational components, and how it is connected to the mission of the club:



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OFFICE OF STUDENT DEVELOPMENT
Travel Funds Worksheet

ORGANIZATION _____ DESTINATION _____
 PURPOSE OF TRIP _____ APPROX. ATTENDANCE _____
 TRIP COORDINATOR _____ CONTACT INFORMATION _____
 FACULTY/STAFF MEMBER ATTENDING _____

TRANSPORTATION EXPENSES:

Charter Bus: **Total \$** _____
 Stockton Shuttle: **Total \$** _____
 Tolls and Parking Fees: **Total \$** _____
 AIRFARE:
 Number of travelers _____ x cost per ticket \$ _____ **Total \$** _____

**The college discourages the use of personal vehicles for student travel.*

REGISTRATION/ENTRY FEES:

Number of Students _____ x cost per student \$ _____
 Number of Students _____ x cost per student \$ _____
 Tax \$ _____ **Total \$** _____

MEAL EXPENSES:

Do not calculate meals that are included in the cost of registration.

_____ Breakfast(s) @ \$ _____ for _____ travelers = \$ _____
 _____ Lunch(s) @ \$ _____ for _____ travelers = \$ _____
 _____ Dinner(s) @ \$ _____ for _____ travelers = \$ _____ **Total \$** _____

**Typically, meals are not funded.*

HOTEL EXPENSES:

Number of rooms _____ x cost per room \$ _____ x number of nights _____
 Number of rooms _____ x cost per room \$ _____ x number of nights _____ **Total \$** _____

MISCELLANEOUS EXPENSES:

OTHER (explain) _____ **Total \$** _____
 OTHER (explain) _____ **Total \$** _____
ESTIMATED TRIP COST **Total \$** _____

****Attach supporting documentation for ALL funds requested and submit all receipts upon return.****

THE OFFICE OF STUDENT DEVELOPMENT
Extra Curricular Travel Form

Organization: _____ Travel Destination: _____
Purpose: _____ Travel Dates: _____
Trip Coordinator/Advisor (print): _____ Trip Coordinator/Advisor Cell #: _____
Stu Dev Advisor's Signature: _____ Stu Dev Advisor's Contact #: _____

| Student's Name | Z# | Student's Cell # | Emergency Contact Name | Relationship | Emergency Contact # | Emergency Contact Email |
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FAXED TO CAMPUS POLICE @ 4454 on: _____

Richard Stockton College of New Jersey
Waiver for Participation for Persons Over 18

Location: _____

Date: _____

I, _____ (print name) have voluntarily requested permission to participate in the Richard Stockton College (trip) _____ on (date) _____. I have familiarized myself with the program and I believe that I am physically, medically and mentally capable of participating in such activity. If there are any medical or other concerns which might limit my participation in such event, I have advised appropriate personnel of such concerns. I am agreeing of my own free will to participate in this activity and use of any facilities or equipment associated with this event.

I have personally and willingly assumed responsibility of all known and unforeseen risks that may occur arising out my participation in this program. On behalf of myself, and any of my heirs, assigns or successors, I hereby agree to release, indemnify, defend and hold harmless Richard Stockton College of New Jersey and its, officers, agents, servants, Board of Trustees, and employees against any damage, claim, demand, liability, judgment, loss, expense, or costs arising from participation in this event whether due to intentional acts or omissions or negligence of Richard Stockton College or any of its employees, servants or agents or those of third parties or organizations. I acknowledge and agree on behalf of myself, my heirs, assigns or successors, that I am releasing Richard Stockton College of New Jersey from any liabilities in law or equity, however the liability may the arise, for any injuries, fatalities, damages, losses or expenses to myself or my personal property. I agree and consent that any disputes arising out of participation in this activity and any and all claims that I may bring against the State of New Jersey and the Richard Stockton College of New Jersey and their employees as a result of this activity shall be subject to the provisions of the laws of the State of New Jersey, particularly the New Jersey Tort Claims Act (N.J.S.A. 59:1-1 et seq.), New Jersey Contractual Liability Act, (N.J.S.A. 59:13-1 et seq.); the New Jersey Charitable Immunity Act, (N.J.S.A. 2A:53A-7 et seq.) and no other action for monetary damages or other legal or equitable relief shall be brought in any other jurisdiction other than the courts of the State of New Jersey and venued in Atlantic County, the situs of the College. I agree that should any damages arise out of my participation in this program that I am financially responsible.

I certify that I have read this release, I am at least 18 years of age and that by my signature below, I bind myself, my heirs, assigns, administrators, and executors to this agreement.

Date: _____ Signature: _____ Z#: _____

Printed Name, Address and telephone of number of participant

Name, telephone number and relationship of person traveling to notify **in case of emergency**

Emergency contact email address

OFFICE OF STUDENT DEVELOPMENT

Vehicle Reservation Form

Club/Organization: _____

Purpose of Trip: _____

Advisor/Trip Coordinator: _____

Destination (complete address): _____

City, State: _____

Date of Departure: _____ Pick-up Time: _____ am pm

Date of Return: _____ Drop-off Time: _____ am pm

Pick-up and Drop off point on campus: _____

Approximate number in group: _____

Stockton Pool Vehicles

Number of vehicles (limit 2): _____

_____ 7 passenger minivan

_____ 9 passenger Chevy Suburban

_____ 15 passenger van*

| Driver(s)**: | License State: | expiration date: | Cell #: |
|---------------------|-----------------------|-------------------------|----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

*15 passenger vehicle drivers must complete an online defensive driving course that can be set up through Sandi Mintz in the Risk Management Office: Sandi.Mintz@stockton.edu or 609-626-3603.

**All drivers must submit a copy of their driver's license and complete the ANNUAL DRIVER'S LICENSE VERIFICATION AND SELF DISCLOSURE FORM available in the Student Development Office.

Stockton Shuttle

\$55 per hour

Chartered Bus

See Melissa Vander Ryk or your club's Student Development advisor for quote