ATTACHMENT II

WEST KERN COMMUNITY COLLEGE DISTRICT

FIELD TRIP/EXCURSION REQUEST

Instructor/Advisor: _____

Class (Name/Number/Section)/Club: _____

Activity (ies)/Destination(s)	Departure Date	Return Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe the objectives of the proposed activity(ies) and how they relate to course/program/club content/objectives.

_____

Transportation: Provided by college _____
Responsibility of Student _____

Attach roster of proposed participants.

Participation form(s) to be signed by each participant:

_____ Field Trip/Excursion Notice
_____ Acknowledgment & Assumption of Potential Risk
_____ Voluntary Activity Waiver, Release & Indemnity Agreement
_____ Other _____

Requested By: _____ Date: _____
Instructor/Advisor

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APPROVED _____

REJECTED _____
REASON: _____

BY: _____ DATE: _____

12 (K-12) 4-00