FIELD TRIPS AND GUEST LECTURES

Academic Field Trips - Field trips must be cleared in advance as to day, time, cost and transportation arrangement with the cognizant Instructional Administrator. Field trips, as part of the required instructional program of a course or curriculum, must not involve an admission, participation charge, or contribution on the part of the student. Each instructor is required to accompany the students on all field trips. The instructor must recognize the liability to both the District and the instructor.

Students have the responsibility of notifying their other instructors of absences for field trips. Students should be encouraged to attend scheduled field trips. If the field trip causes a conflict with other classes, arrangements should be made with the instructor(s) whose class(es) will be missed.

Instructors may schedule field trips on Saturday and Sunday, but should offer alternative assignments for students who cannot attend. A field trip on Saturday or Sunday cannot substitute for a regularly scheduled class. Trips into Mexico need special insurance considerations and, therefore, require the approval of the Vice President for Business Services.

Guest Lecturers - Instructors wishing to invite resource personnel to participate in the instructional program for their own classes should notify their Instructional Administrator in advance as to name, date and time of arrival of their guest(s). Instructors should make every effort to not abuse class time by inviting partisan political candidates during election campaigns.

The Vice President for Academic Affairs should be contacted regarding monies that may be available for the employment of instructional consultants **prior** to any arrangements for such services. Instructors must obtain prior approval of the cognizant Instructional Administrator before inviting a speaker to address combined classes, campus convocations, club meetings, etc. All other requests must comply with the Guest Speaker Policy.

SOUTHWESTERN COLLEGE

Southwestern Community College District

EXCURSION/FIELD TRIP WAIVER AND MEDICAL AUTHORIZATION

Title 5, California Code of Regulations, Section 55450, states in part as follows:

> "All persons making the excursion or field trip shall be deemed to have waived all claims against the District or the State of California for injury, accident, illness or death occurring during or by any reason of the excursion or field trip. All adults taking out-of-state excursion or field trips and all parents and guardians or guardians of the student taking out-of-state excursions or field trips shall sign a statement waiving such claims."

In accordance with Title 5, California Code of Regulations Section 55450, and in consideration of my participation in said excursion or field trip, I hereby release the Southwestern Community College District, its officers, employees, and agents from and waive all claims for injury, accident, illness, death or property damage occurring during or by reason of said excursion or field trip, except for any claims based upon the fraud, willful injury to person or property, or violation of law, by the District, its officers, employees, and agents, and further agree to indemnify and hold harmless the District, it officers, employees, and agents from any claims and actions for damage or injury which any person may assert by reason of my conduct while participating in said excursion or field trip.

In the event of any illness or injury, I hereby consent to whatever X-ray, examination, anesthetic, medical, dental, or surgical diagnosis or treatment and hospital care from a licensed physician and/or surgeon is deemed necessary for my safety and welfare. I agree that the resulting expenses will be my responsibility.

Field Trip Name _____ **Date** _____

Print Name _____ **Student I.D. #** _____

Signature _____ **Date** _____

By my signature hereon, I agree to abide by Southwestern Community College District Policy No. 6047 (Student Conduct Standards and Discipline) while participating in said excursion or field trip. The policy includes, but is not limited to, prohibitions against disruptive behavior and the possession and/or use of alcohol and/or controlled substances. In addition, I agree to stay with the excursion or field trip for the duration of the activity.

Health Insurance Carrier _____ **Policy Number** _____

☐ **No Health Insurance Coverage**

In case of an emergency, please contact:

Name _____ **Relationship** _____

Address _____ **City, State, Zip Code** _____

(____)_____

Phone Number