

Stony Brook University Undergraduate Student Government Off-Campus Trip Form 2010-2011

All off-campus trips must meet the following criteria:

- Related to the mission of the club/organization.
- Must be submitted to the USG Administrative Director TWO weeks prior to the trip. In order for an off campus form to be approved, all parts of the form must be completed in its entirety.
- An event sponsored by clubs and organizations that are scheduled to take place outside of the Stony Brook University Campus.
- Practices for sports clubs are not events, therefore, are not considered to be off-campus trips.

Club Name:		Date Submitted:	
Trip Coordinator:		Trip Coordinator Cell Phone #	
Trip Destination:			
Destination Address:		Purpose of Trip:	
		· · · · ·	
Destination Phone:		Web-Site:	
	TRIP ITINE	RARY	
Departing From Stony Brook:		Arrival at Off-Campus Site	
Date:		Date:	
Time:		Time:	
	Return T	rin	
Departure from Off-Campus Site	Noturn 1	Arrival at Stony Brook	
·		,	
Date:			
Time:			
	LODGIN	NG	
If this is an overnight trip, please provide the following	owing lodging information.		
Lodge Name:			
Address:			
Phone Number:			
How many rooms have you reserved?			
	47776		
	APPROV	ALS	
Campus Recreation/Program Advisor Signature: _		Date:	
USG Administrative Director Signature:		Date:	
	SAC-Suite 202	Phone: (631) 632-6460	

PLEASE READ AND COMPLETE THIS PAGE IF YOU ARE DRIVING YOUR PERSONAL VEHICLE OR A RENTAL CAR. (Each driver must complete one)

In consideration of participating in the	on
Name of Event	
and any related events and activities per	taining to driving other students,
I,, acknowledge, appreciate, and agr	ree that:
1. The risk of injury from driving the students in any car is significant, in paralysis and death, and while particular rules, equipment, and personal dinjury does exist; and,	
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both responsibility for the passengers in the automobile I am driving; and,	known and unknown, and assume full
3. I willingly agree to comply with the stated and customary terms and coobserve any unusual significant hazard during my presence or participation in the car from participation and bring such to the attention of the nearest	on, I will remove myself and the passengers
4. I, for myself and on behalf of my heirs, assigns, personal representative indemnify, and hold harmless Stony Brook University, the Undergraduate agents and/or employees, clubs, and organizations ('Releases''), With responders or loss or damage to person or property, to the fullest extent permitted by	e Student Government, its officers, officials, bect to any and all injury, disability, death,
5. I understand that if injury or property damage occurs as a result of my own personal automobile liability insurance for liability coverage.	
I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOU	UP SUBSTANTIAL RIGHTS BY
I have provided the Undergraduate Student Government with a copy of m license, and affirm that the insurance is in effect.	y automobile insurance card, my driver's
It is understood that I am not acting as an agent, partner, or sub-contractor It is mutually agreed that no contractual relationship exists between the partner.	
Participant's Signature	Participant's Age
i articipant o digitature	т антогранко лус
Participant's Phone Number & E-Mail Address	Date
Emergency Contact Name & Relationship	Emergency Contact Phone #

USG Off-Campus Trip Form 2010-2011 What kind of transportation will you use to arrive at your off-campus trip destination? Chartered Rental Car Personal Car **Mode of Transportation** Bus (Bus Company Name) (circle one) **LIRR** Plane Other: **Required Information for Rental and Personal Cars** Name (please print): Driver's License State: Driver's License #: Car Model (personal car only): Car Year (personal car only): Car License Plate Number (personal car only): **Auto Insurance Company Name: Insurance Policy Number:** Insurance Policy Effective Date: Insurance Policy Expiration Date: SIGNATURE:

LENS Program Checklist

(FOR OFFICE USE ONLY)

O	,
LENS Check performed by:	
,	Print Name
	Signature
LENS Check performed on:	
·	Date
	ACCEPTABLE (5 or few points)
	 Less than 2 moving violations in the last 3 years OR
LENS Check Results (Please check one)	Less than 2 preventable accidents in the last 3 years
	CONDITIONAL (6-8 points)
	2 moving violations in the last 3 years OR

- **UNACCEPTABLE (9 or More Points)**
- 3 or more moving violations in the last 3 years

2 preventable accidents in the last 3 years **OR**

• 3 or more preventable accidents in the last 3 years **OR**

Phone: (631) 632-6460

 Any combination of 3 or more moving violation and preventable accident in the last 3 years

1 moving violation plus 1 preventable accident in the last 3 years

STONY BROOK UNIVERSITY CLUBS AND ORGANIZATIONS CODE OF CONDUCT

The purpose of a student club/organization is to enhance the University's educational mission and adhere to all University policies and procedures. Clubs/Organizations are to conduct themselves in a manner that is a credit to the University. Clubs and organizations should add to the positive image of Stony Brook University and therefore any behavior that serves otherwise will be handled appropriately. Clubs/Organization are responsible for the actions of their members on and off campus and any liability that is associated with these actions.

- As a Stony Brook University club/organization, adherence to the highest principles, integrity, and dignity is expected
- Hazing, harassing, threatening, degrading language or actions, or any practice by a group or individual that
 degrades a student or club member, endangers health, jeopardizes personal safety, or interferes with a student's
 duties or with a student's class attendance or a person's educations pursuits is STRICTLY PROHIBITED.
 Voluntary participation in initiation activities and other traditions still constitutes hazing. No club/organization
 member shall engage or participate in any form of these actions.
- Clubs/organizations are expected to be drug and alcohol free during the duration of trip/event while
 representing Stony Brook University. This includes a practices, competitions or events. Using team funds for
 the purchase of alcoholic beverages is prohibited.
- Clubs/Organizations represent Stony Brook University both at home and when traveling. When traveling, it is expected that club members behave appropriately and respectfully. The Student Conduct Code is applicable on and off campus.
- Please inform University Police immediately of any accidents, injuries or illnesses that require hospitalization. (631-632-3333)

OFF CAMPUS TRIPS, FULLY UNDERSTAND ITS WITHOUT ANY INDUCEMENT.	STERMS, AND SIGN IT FREELY AND VOLUNTARILY
Student's Name	Date
Audant Cimatura	
Student Signature	

I HAVE READ THE ABOVE CLUBS AND ORGANIZATIONS CODE OF CONDUCT AGREEMENT FOR

Request for Driver Registration and Motor Vehicle Record Check

PRINT ALL INFORMATION EXACTLY AS IT APPEARS ON YOUR DRIVER'S LICENSE

(Each driver must complete one)

Last Name:	First:		Middle:	
Driver's License #:				Birth://
Driver's Email:	Driver's Pho	ne #:	Licer	ıse Class:
Club Name:				
Program Advisor Name:		Program A	dvisor Phone #:	
AUTHORIZATION	AND ACKNOWLEDGE	MENT OF DR	IVER RESPONSII	BILITIES
All persons (employees, students, volucampus trip are required to provide counderstand the Driver Protection Privatide driver selection and supervision at Student Government to obtain my Motyears. I understand that Stony Brook making decisions regarding my use of Furthermore, I understand and agree requirements and responsibilities on a requirements listed herein, and any or requirements, and failure to maintain action up to and including suspension	urrent driver's license informaticy Act of 1994, amended 9/9 ctivities. By signing below, I tor Vehicle Record (MVR) frou University and Undergraduate a vehicle for Stony Brook Ure that driving any vehicle or all drivers as listed on the resther laws or policies that matical an acceptable or conditional	tion for verification for verification for verification of the reby authorize of the reby authorize of the reby authorize of the student Governiversity and Undown Stony Brook Uperse side of this by be applicable.	on of license status and elease of my MVR dat Stony Brook Universities I have held a driver' nament will consider this ergraduate Student Gountersity and USG by form. I agree to abid I understand that fails (as defined below), resulting the state of th	d driving history. I ta for other than bona ty and Undergraduate is license in the last 3 information when overnment. usiness imposes certain the by the obligations and the ure to comply with these may result in disciplinary
Signature:			Date:	

Motor Vehicle Record Review Criteria

Moving Violation = 3 points Preventable Accident* = 4 points

ACCEPTABLE 5 or fewer points	CONDITIONAL 6 - 8 points	UNACCEPTABLE 9 or more points
Less than 2 moving violations in the last 3 years	2 moving violations in the last 3 years	3 or more moving violations in the last 3 years
Less than 2 preventable accidents in the last 3 years	2 preventable accidents in the last 3 years	3 or more preventable accidents in the last 3 years
	1 moving violation plus 1 preventable accident in the last 3 years	Any combination of 3 or more moving violations and preventable accidents in the last 3 years

DRIVER RESPONSIBILITIES

Signature:	Date:/
conditional drivi	at failure to comply with these requirements, and failure to maintain an acceptable or ng record, may result in disciplinary action up to and including suspension or revocation of SG driving privileges.
	erstand that if injury or property damage occurs as a result of an accident, I will have to look first to on personal automobile liability insurance for liability coverage.
	diately advise a program advisor or other appropriate authority of any change in driving status such nse suspension or revocation, or medical condition that interferes with driving.
12. Immed	diately report all accidents or traffic citations to a program advisor and appropriate authority.
-	et the vehicle for obvious safety concerns prior to use, report any defects to the appropriate authority, ot operate a vehicle that has deficiencies that make it unsafe to drive.
10. Turn t	he vehicle off, remove the keys, and lock the vehicle when it is left unattended.
9. Not di	ive under the influence of alcohol or drugs, including medications if they cause impairment.
8. Not op	perate a vehicle unless all occupants are wearing seatbelts.
7. Not tra	ansport unauthorized passengers or permit any unauthorized person to drive the vehicle.
6. Assun	ne responsibility for any fine or citation received while driving on USG funded off campus trips.
5. Drive	vehicles at controlled speeds that are appropriate to road, loading, and hazard conditions.
-	te vehicles in accordance with all applicable University and USG regulations and observe all able traffic laws.
3. If usin	g a rental vehicle, use it for authorized, official purposes only.
2. Have	a valid driver's license in my possession at all times.
1. Drive	with courtesy and exercise reasonable caution to prevent collisions or other losses.
When driving an	y vehicle on USG funded off campus trips, I agree to (please initial):

PLEASE ATTATCH A COPY OF YOUR DRIVERS LICENSE AND AUTO INSURANCE CARD TO THIS FORM

In consideration of participating in the above trip, I acknowledge, appreciate, and agree that: a trip may have unforeseeable circumstances which could result in an accident or injury, beyond the control of USG or Stony Brook University. With that in mind I assume this risk and;

- 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk of serious injury does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself form participation and bring such to the attention of the nearest official immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS STONY BROOK UNIVERSITY, THE UNDERGRADUATE STUDENT GOVERNMENT, its officers, officials, agents and/or employees, clubs, and organizations ('Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

First (please print)	Last (please print)	Solar ID #	Cell Phone #	Signature	Emergency Contact Name	Emergency Contact Phone Number
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						