

## CUNY OFF-CAMPUS STUDENT TRAVEL APPROVAL FORM

The [Off-Campus Student Travel Approval Form](#) must be completed by the Trip Sponsor and submitted to the Chief Student Affairs Officer for student organization travel or to the Chief Academic Officer for academic (class) related travel a minimum of one (1) month prior to travel. All organized travel is expected to follow the **CUNY Student Domestic Trip and Travel Guidelines**. These Guidelines can be found at <http://www.cuny.edu/academics/programs/international/faculty.html>. This Form must be approved by the Chief Student Affairs Officer or the Chief Academic Officer in order for travel to commence.

### To Be Completed by the Trip Sponsor.

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Type of Trip:     Academic Field Trip     Student Organization Travel     Other: \_\_\_\_\_

Name of Department/Student Club/Organization: \_\_\_\_\_

If the trip is Academic, identify the Course and Section: \_\_\_\_\_

Trip Sponsor Name: \_\_\_\_\_ Status:     Faculty         Staff  
(please print legibly)

Title of Trip Sponsor: \_\_\_\_\_

Name of College: \_\_\_\_\_

Cell Phone:            (        ) \_\_\_\_\_

Alternative Phone:    (        ) \_\_\_\_\_

Email: \_\_\_\_\_

(most frequently checked email address)

Will the trip sponsor be accompanying participants on the Travel/Event/Activity?:     Yes     No

*(If you responded "No", please fill out the next page to provide the contact information for the Trip Chaperone or Trip Contact Person.)*

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If the trip chaperone is different from the trip sponsor, please complete the following information. If you have more than one trip chaperone, please attach an additional page with complete information. If there is no trip chaperone, provide the information for the trip contact person.

Choose One:    Trip Chaperone       Trip Contact Person

Name of Trip Chaperone/Trip Contact Person: \_\_\_\_\_  
(Please print legibly)

Title of Trip Chaperone/Trip Contact Person: \_\_\_\_\_

Name of College: \_\_\_\_\_

Are you a club officer?    Yes    No    If yes, which office: \_\_\_\_\_

Cell Phone:            (        ) \_\_\_\_\_

Alternative Phone:    (        ) \_\_\_\_\_

Email: \_\_\_\_\_  
(most frequently checked email address)

**Approval (Signatures Required)**

By signing, I certify I have read the **Domestic Trip and Travel Guidelines** and agree that the proposed activity satisfies all requirements.

\_\_\_\_\_  
Name of Trip Sponsor

\_\_\_\_\_  
Signature of Trip Sponsor

\_\_\_\_\_  
Date

The attached Off-Campus Student Travel Approval Form is hereby approved by the Chief Academic Officer or Chief Student Affairs Officer.

\_\_\_\_\_  
Name of Chief Academic Officer or Chief Student Affairs Officer

\_\_\_\_\_  
Signature of Chief Academic Officer or  
Chief Student Affairs Officer

\_\_\_\_\_  
Date

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Destination of Travel/Event/Activity:

Description of Travel/Event/Activity:

Purpose of Travel:

Number of Students: \_\_\_\_\_

Dates of Travel: Departing Day: \_\_\_\_\_ Time: \_\_\_\_\_

Returning Day: \_\_\_\_\_ Time: \_\_\_\_\_

Transportation (*Check all that apply*):  Car Rental  Train  Plane

University Vehicle  Contracted Bus Service

Other \_\_\_\_\_

Transportation Details (*Please provide relevant details*): Driver's Name: \_\_\_\_\_

DMV Number of Driver: \_\_\_\_\_ Rental Service: \_\_\_\_\_

Name of Bus/Train/Airline Co.: \_\_\_\_\_ Flight/Train Number(s): \_\_\_\_\_

Will the travel require overnight lodging?  Yes  No

(*If yes, please complete the next section.*)

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Name of Accommodation: \_\_\_\_\_

Type of Accommodation:  Hotel  Hostel  College Residence Hall

Retreat Center  Personal Home  Conference Center

Other \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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\* *Attach additional sheets as necessary.*

**Please attach a complete trip itinerary and any other relevant attachments.**