# OFF-CAMPUS STUDENT TRAVELGUIDE





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# INTRODUCTION

Rochester Community Technical College (RCTC) has numerous opportunities for involvement outside of the classroom through Student Life activities. Some of these include Student Clubs, Honor Societies, Campus Events, and Athletics. While there are many exciting on-campus opportunities throughout the year, we also acknowledge that off-campus travel occurs in each of these areas. This manual is designed to provide guidelines for off-campus student travel to faculty, staff, and administration.

# TRAVEL LEADER(S)

An advisor (MSCF, MMA, or exempt MAPE) must accompany students on all school-related functions outside of the Rochester area, checking in with the student participants during the trip and holding them accountable for their attendance and participation in all trip activities (i.e. conference sessions). Two trip advisors will be required for any group sending 15 or more students on a trip in-state or out-of-state. At the discretion of (and with permission from) the Vice President of Student Affairs, or their designee, students may travel to LeadMN Conferences without a trip advisor.

## PRE-DEPARTURE DOCUMENTATION

After a student commits to travel, the following information must be documented by the travel leader(s) and submitted to the Student Life Coordinator a minimum of two (2) business days prior to departure. The following should be included:

- a. First and last name of student
- b. RCTC email address
- c. Student phone number
- d. Emergency contact information (name and phone number)
- e. Disclosure of known medical conditions (voluntary)
- f. Disclosure of any disabilities and/or request for accommodations
- g. Liability/Assumption of Risk Waiver (Appendix A)
- h. Travel Agreement (Appendix B)

The travel leader(s) should also complete this list (excluding the travel agreement) in case there is an emergency and staff need to know who to contact on the leader's behalf. Travel leader(s) should also provide their cell phone number to students participating in the trip.

\*\*Travel documents should be completed every time a student travels outside of Rochester city limits and/or when travel involves an overnight stay.\*\*

# **EXCUSED ABSENCES**

It is the student's responsibility to contact his/her instructor(s) at least two academic calendar days prior to the absence to arrange to make up work to be missed. If the student fails to fulfill this responsibility, he/she may lose the opportunity to make up work. Instructors may require make up work to be completed prior to the absence.

# **BEHAVIOR AND CONDUCT**

RCTC student and program participants are expected to follow College policies and behavioral standards outlined within the Code of Student Conduct (RCTC Policy 3.6.1) at all times. RCTC students,



faculty, and staff are entitled to a safe and positive learning and working environment. Behaviors which interfere with the educational purposes and administrative processes of the College will be addressed promptly and fairly for the safety and well-being of the College community.

Behavioral standards apply to all college-owned property and college-sponsored activities. Any action that interferes with the education of any other student or disrupts the operations of the College will be considered a violation of the Code of Student Conduct and may result in participants being sent home immediately at the student's expense as well as possible disciplinary action by the college. Travel leaders must promptly respond to behaviors that create a disruption and/or violate the code with appropriate interim actions and by completing a referral to the Office of Student Rights and Responsibilities using an <a href="Incident Report">Incident Report</a>. Once the Incident Report is completed, the Office of Student Rights and Responsibilities will respond accordingly within the procedures outlined with the Code of Student Conduct.

## **CANCELLATIONS**

The travel leader(s) should clearly articulate cancellation requirements to each participant. These can vary based on the situation. For instance, if you are purchasing airline tickets and paying registration fees, the monetary commitment is large, and the cancellation policy should be strict. If travel is for a free local seminar, you may be able to be more lenient with cancellation policies. For questions regarding this, please reach out to the Department of Student Life for consultation.

# **EMERGENCY PROCEDURES**

In case of an emergency, please follow the below procedure:

- 1. Dial 911 and/or connect with local authorities to assist with the situation.
- 2. Notify the Student Life Coordinator and Vice President of Student Affairs. Email: natalie.dicke@rctc.edu and teresa.brown@rctc.edu.
- 3. Contact the student's emergency contact and provide them with updates.

# **MEAL MONEY**

Students traveling over mealtimes, are able to receive meal money if there is money in the assigned cost center. The daily limit should not exceed \$35 per student. If budget allows, travel leaders may also allocate this amount for themselves. Please see a complete breakdown of meal money below:

Breakfast: \$10Lunch: \$10Dinner: \$15

The travel leader is responsible for completing a Special Expense Form and PO ahead of time to receive the check. Travel leaders can register as a vendor in the state system which allows for a check to be dispersed to him/her personally to be cashed. For more information regarding this process, contact Heather Scholz at <a href="heather.scholz@rctc.edu">heather.scholz@rctc.edu</a>.



# **LODGING**

It is strongly recommended that there are not more than two students per room (one per bed) when traveling for overnight trips. Please be sure to discuss arrangements with students prior to departure to ensure no student feels uncomfortable with whom they have been placed. In some cases, a student may request to have an individual room.

The travel leader should take care of all hotel bookings, checking in, and payment. Prior to departure, there should be a PO created or purchase card used to handle payment of the rooms. It is strongly advised not to use personal funds and expect to be reimbursed; this process can be very time consuming.

## TRANSPORTATION

RCTC fleet vehicles are available to use by staff, faculty, and students. Drivers MUST first work with the Business Office to complete a Vehicle Use Agreement before driving any state vehicle. For additional information regarding vehicle usage, contact Deb Cannon at <a href="mailto:Deb.Cannon@rctc.edu">Deb.Cannon@rctc.edu</a>.

Students and/or travel leader(s) may choose to drive their own vehicles; however, we cannot require anyone to do so. If a student and/or travel leader(s) chooses to drive themselves, they should be aware that the insurance on their vehicle will be primary.

## LIABILITY

Students are covered for their own injuries under the General Liability Policy only if RCTC or its employees' negligence caused the student's injuries, whether on campus or while at a school sanctioned event at an offsite location.

An employee is an insured party under the General Liability, so if their negligent behavior caused injury to a student, General Liability would defend the employee as long as the employee was acting within their scope of employment.

Other questions regarding Risk Management should be directed to Heather Scholz at heather.scholz@rctc.edu.

# **CONTACT INFORMATION**

Natalie Dicke, Student Life Coordinator natalie.dicke@rctc.edu



# **APPENDIX A**

# Waiver of Liability, Release, and Indemnification Agreement READ CAREFULLY BEFORE SIGNING

I have voluntarily agreed to participate in the	
	(EVENT NAME, LOCATION, AND DATES

I am aware of the dangers and risks to my person and property involved in participating in these activities. Risks associated with my participation in **Student Life** trips include, but are not limited to, loss of or damage to personal property, bodily injury, or even death. All such risks are known, understood, and assumed by me.

In consideration of the College's agreement to permit me to participate in this activity, the receipt and sufficiency of which is hereby acknowledged, I agree as follows:

- 1) I agree to abide by the safety rules and regulations as set by **Student Life**. Failure to do so will disqualify me from participation.
- I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby release and forever discharge the College, the State of Minnesota, and its employees, agents, officers, trustees and representatives (in their official and individual capacities) ("Releasees") from any and all liability whatsoever for any and all damages, losses or injuries (including death) I sustain to my person or property or both, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses and costs, including attorney fees, which arise out of, result from, occur during, or are connected in any manner with my participation in Student Life trips whether caused by the negligence of the Releasees or otherwise; except that which is the result of gross negligence and/or wanton misconduct by the Releasees
- I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby agree to indemnify, defend and hold harmless the College, the State of Minnesota, and its employees, agents, officers, trustees and representatives (in their official and individual capacities) from any and all liability, loss, damage or expense, including attorney fees, that they or any of them incur or sustain as a result of any claims, demands, actions, causes of action, damages, judgments, costs or expenses, including attorney's fees, which arise out of, occur during, or are in any way connected with my participation in Student Life sponsored activities.
- 4) I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident or illness during this activity or event.

I agree that this Waiver, Release and Indemnification Agreement is to be construed under the laws of the State of Minnesota, U.S.A.; and that if any portion is held invalid, the balance shall, notwithstanding, continue in full legal force and effect. I agree that this Agreement is to be construed broadly to provide a release, indemnification and waiver to the maximum extent permissible under applicable law.

In signing this document, I hereby acknowledge that I have read this entire document, that I understand its terms, that I am at least eighteen (18) years of age, that by signing it I am giving up substantial legal rights I might otherwise have, and that I have signed it knowingly and voluntarily.

Signature	Date
Name	

## RCTC OFF CAMPUS STUDENT TRAVEL GUIDE



Emergency Contact Info	
Name of emergency contact	Phone number of emergency contact
NOTICE: If participant is under the age of 18, l	his or her parent or legal guardian must sign:
I, (printed name)	, am the parent or legal guardian o
•	ead and I understand the provisions of this document, I consent
to the participant taking part in the activities de Waiver of Liability, Release, and Indemnificatio	escribed above, and I fully enter into and agree to the above n Agreement.
Signature of Parent or Legal Guardian	Date



# **APPENDIX B**

## **Student Travel Participation Contract**

**Event Dates:** 

RCTC Travel Leader (Faculty or Staff Member):

## **Rules and Expectations**

## 1. Rochester Community and Technical College Student Organization Representative

I acknowledge that I am serving as a representative of Rochester Community and Technical College (hereafter "RCTC") and that I have been chosen by my organization to represent RCTC and its interests. I understand that any action I take will affect people's opinion of my organization and RCTC.

## 2. Travel Accommodations/Program Participation

I agree to stay at the designated lodging accommodations afforded by RCTC (if any) and return via any transportation arranged by the College. I will attend and participate in all aspects of the program (i.e. conference, educational training sessions, etc.). Absent an emergency, I understand I must give 72 hours' notice if I am unable to attend. I will immediately notify the designated College sponsor (advisor) should an emergency precludes my ability to attend.

## 3. College Policies

I understand that the rules governing student responsibility and behavior as stated in all applicable Minnesota State and RCTC policies and procedures are in effect for the duration of the program. I am responsible for adhering to established policies, heeding verbal and written announcements, and exhibiting reasonable and acceptable behavior at scheduled events and on excursions.

## 4. Timeliness

I understand that I will meet travel leaders at the time and place scheduled and that failure to arrive on time may result in forfeiture of participation. I may be held responsible for the full cost of my participation in the event. The College may consider circumstances to be beyond the student participant's control to waive any fees or costs. The decision of the Student Life Coordinator as to this issue shall be final.

## 5. Alcohol

I understand that RCTC prohibits the illegal or otherwise unacceptable use of alcohol by students and that it is my responsibility to know the risks associated with alcohol use and abuse. The illegal or excessive consumption of alcohol or misconduct due to alcohol consumption will not be tolerated and will result in disciplinary action, including but not limited to dismissal from the program and disciplinary proceedings.

#### 6. Drugs

Illegal drugs as determined by the laws of the United States and the State of Minnesota in any form are not tolerated. Possession or use of illegal drugs is punishable by fine or imprisonment. Student participants found using or possessing illegal drugs in any form are subject to immediate dismissal from the program.

## 7. Health Care and Emergencies

Student participant is responsible for health care and conduct. Student participant understands that on rare occasions an emergency may develop which necessitates the administration of medical care, hospitalization. RCTC reserves the right to notify emergency medical services for treatment. I also authorize any official representative(s) of the program to provide any health information as appropriate. It is understood that such treatment shall be solely at my expense, and I agree to reimburse RCTC for any expenses which it might



suffer on account of said injury or treatment thereof. In the event of serious illness, accident, or emergency, my designated emergency contact(s), as indicated on this document, may be notified. I have considered, and assume responsibility for, any pre-existing medical conditions that may be impacted by my participation in this program.

## 8. Conduct and Dismissal

**Medical Information** 

Student participant will be subject to all laws including United States, State of Minnesota, and any locality where the student participant might be. I understand that the official representative(s) of RCTC has the right to dismiss me from the program at any time if: a) my conduct is deemed unacceptable or violates established rules of behavior; b) I violate laws, rules and regulations of the United States, the State of Minnesota, or the locality where I might be located; or c) the official representative(s) has reasonable cause to believe that my continued presence in the program constitutes a danger to the health or safety of persons, including myself, or property. Student Participant understands that a decision to dismiss from the program/trip will be final; that separation from the program will terminate my status as a program/trip participant; and that the student participant will remain responsible for costs incurred on their behalf. I understand that once dismissed I will not be allowed to remain in program/trip facilities nor participate in any program/trip activities.

List all prescription drugs which are necessary for you to take on trips or activities and wha none, write "none"):	t they are for: (if
Do you have any current or past health concerns that the College should be aware of (e.g. a diabetes, epilepsy, broken bones, sprains, dislocations, heart conditions, etc.)? Please explainne"):	
Contact Information	
Student Cell Phone Number:	
Emergency Contact Name:	
Emergency Contact Phone:	
Signature  I, the undersigned, affirm that the information disclosed on this travel authorization and in true and correct. I also confirm that I understand and agree to the information detailed about the correct.	
Student Printed Name	
Student Signature	 Date



# **APPENDIX C**

Off-C	ampus Travel Checklist		
	Read Travel Guide		
	Meal money		
	Travel Leaders Contact Inform	ation	
	Transportation Reservations		
Off-C	ampus Travel Document Check	dist	
Signate I certife Coordi	y that all required documents listed abo	ontract (pages 8-9)	
 Studer	t Printed Name	-	
Studer	t Signature	-	Date
 Studer	t Life Coordinator Name	-	
Studer	t Life Coordinator Signature	-	 Date