



**UNIVERSITY OF MARYLAND
EASTERN SHORE**

Enrollment Management & Student Experience

REQUEST FOR OFF-CAMPUS TRIP AND STUDENT ROSTER FORM

All students traveling must complete a **Waiver of Liability and Hold Harmless Agreement** prior to traveling, regardless of whether they are using University vehicles, chartered vehicles or personal transportation. **Completed forms and waivers must be submitted at least SEVEN DAYS in advance** to the Office of Enrollment Management and Student Experience via email at emse@umes.edu or in person in the Student Services Center Room 2169. **Please complete a separate form for each requested trip.**

SECTION 1: PURPOSE OF TRIP

Name of Group Traveling: _____

Contact Person: _____

Phone: _____

Person In Charge Traveling with Group: _____

Phone: _____

Date(s) of Trip: _____

Reason for Trip: _____

Destination: _____

CITY

STATE

ZIP

SECTION 2: TRANSPORTATION

Method of Transportation: UMES transportation **OR** Private Vehicle(s)

Type of UMES transportation requested: VAN CAR MINI-BUS N/A

UMES Driver Requested? Yes No

Charter Service: _____
Name of Company

Departure: Leaving Campus: _____
Date and time

Return: Leaving Destination: _____
Date and time

SECTION 3: SIGNATURES (REQUIRED)

Print Name: REQUESTOR

Signature: REQUESTOR

Date

Print Name: APPROVER (Dept. Chair/Dean/VP)

Signature: APPROVER

Date

FOR USE BY EMSE ONLY

Received by EMSE (name)

Date

Revised September 2025

REQUEST FOR OFF-CAMPUS TRIP - STUDENT ROSTER

1. Student Name _____ ID# _____
Emergency Contact and phone _____
2. Student Name _____ ID# _____
Emergency Contact and phone _____
3. Student Name _____ ID# _____
Emergency Contact and phone _____
4. Student Name _____ ID# _____
Emergency Contact and phone _____
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33. Student Name _____ ID# _____
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34. Student Name _____ ID# _____
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