

OFF CAMPUS ACTIVITY & FIELD TRIP ERP

OFF CAMPUS ACTIVITY & FIELD TRIP EMERGENCY RESPONSE PLAN



TRIP OVERVIEW

This <u>E</u>mergency <u>Response P</u>lan will provide guidelines to assist the trip coordinator and field trip participants if an emergency arises. The field trip coordinator should exercise his or her best judgment in order to minimize risk or injury to all participants if an unexpected situation arises that is not addressed in the response plan. Reminder: trip coordinators and participants can always contact Cal Maritime Police Department 707-654-1176 for additional 24/7 support.

Off Campus Activity/Field Trip:			Department		
Trip Location/Add	dress:				
Trip Date(s):	Departure Date		Return Date		
Activity Time(s):	Departure Time		Projected Return Time		
Instructor/Trip			Contact Number while on trip		
Coordinator:					
EMERGENCY RESP		a corious injury or doath, multin	le injuries, or extensive property	damaga The first	
	or any injured individu		ie injuries, or extensive property	damage. The first	
-			destination that would be able	o offer assistance	
	<u> </u>	of other facilities flear the illiar		.0 Offer assistance.	
HOSPITAL NAME			HOSPITAL ADDRESS		
Remain with any ir	niured student narticir	nants, as circumstances nermit i	l until relieved by a responsible in	dividual such as a	
	emergency medical pe		antin reneved by a responsible in	arriadai, saciras a	
Contact the Depar	tment Management (i	.e. Department Chair, Dean) Dea	an as soon as is reasonably possi	ble after the	
situation has stabi	lized.				
NAME			EMERGENCY CONTACT NUMBER		
			ng out the emergency response		
trip coordinator is	incapacitated. This pe	rson should have access to the p	participants' emergency contact	information.	
BACKUP TRIP COORDINATOR(S) NAME			CONTACT NUMBER		
		situation attracts media attention	on. All media inquiries should be	referred to the	
Public Information Officer.					
UNIVERSITY PUB	LIC INFORMATION OF	FICER (PIO) CONTACT	CONTACT NUMBER		



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PARTICIPANT ROSTER

I acknowledge that the information on the "Assumption of Risk and Release of Liability" that I signed, is correct and valid for today's field trip. I also acknowledge that the emergency contact number listed below is valid during today's trip.

Name	Signature	Cell Phone	Emergency Contact Name/ Phone Number