

PASCO-HERNANDO STATE COLLEGE  
Student Development Office  
MEETING/CONVENTION ATTENDANCE FORM FOR STUDENTS

Student: \_\_\_\_\_  
Print Name

Student Cell # \_\_\_\_\_ Special Travel Accommodations Needed: \_\_\_\_\_

I am currently enrolled as a student at PHSC in the \_\_\_\_\_ Degree/Program

**MEETING/CONVENTION/OTHER**

Club/Organization: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Location \_\_\_\_\_  
Hotel/College, etc. City State

Telephone # \_\_\_\_\_ Date(s) From: \_\_\_\_\_ To: \_\_\_\_\_

I am attending the meeting (etc.) described above on the dates noted. I will be: Check ONE below:

- \_\_\_\_\_ Driving  
\_\_\_\_\_ Riding with a college employee (NAME) \_\_\_\_\_  
\_\_\_\_\_ Riding with another student (NAME) \_\_\_\_\_

**TRIP INCLUDES:** \_\_\_\_\_ Air flight \_\_\_\_\_ Bus transportation

**EMERGENCY CONTACT PERSON:** Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Telephone # \_\_\_\_\_

This IMM has been reviewed with the following College Employee (NAME) \_\_\_\_\_

**IMM #6-3**

I recognize and acknowledge that I am solely responsible for my conduct and personal safety while attending this meeting or function, while traveling to and from the meeting place and while engaged in any social or independent activities before or after the meeting. I hereby release PHSC, and its agents and employees from all liability for my conduct or personal safety in connection with this function. If I choose to ride with another student, I understand that I am responsible for ensuring that the student is a competent driver and appropriately insured against accident and injury.

During the event described above, and during any travel to and from the event, I agree to comply with Internal Management memorandum IMM #6-3, "Guidelines for Student Conduct While Representing the College In College-Affiliated Activities Both On and Off-Campus," which is attached.

I know that I am to attend all events at my meeting/convention AND THAT I MAY BE REQUIRED TO REIMBURSE THE COLLEGE FOR MY EXPENSES IF I DO NOT COMPLY.

\_\_\_\_\_  
Student Signature Date

Received by Trip Sponsor: \_\_\_\_\_  
Date Sponsor Signature

DISTRIBUTION: Original Attached to Field Trip Request  
Copies Director of Student Life & Leadership  
Trip Sponsor  
Student (Copy of IMM #6-3)