

Please only submit one form. Must b	e submitted at least <b>tw</b> e	weeks prior to travel for approval	request.	
Student Organization Name				
Travel Purpose				
Destination	on Travel Date(s)			
Address:				
Departure Time [ ] A	AM [ ]PM Re	turn Time [ ] AM [	] PM	
Advisor's Name		Number of Travelers		
Advisor's Signature	<del>-</del>	Date		
Transportation options:		Travel Reimbursement:		
<ul> <li>[ ] Requesting a college vehicle from LCC (Students are not allowed to drive college vehicles whether owned, leased, or rented.)</li> <li>[ ] No college vehicle needed</li> </ul>		If requesting travel reimbursement from your registered student organization fund account, please submit an Expense Request form. Funds must be available in the student organization LCC Foundation account at the time of the expense.		
By completing the following, I agree to all release Lansing Community College as the participation in the student organization to or omission by LCC and not caused in participation for RSO advisor(s) and currently organization during the entire travel. Studies and the property of the participation of the property of	to account of any losses, exavel listed above unless art by my own negligence.  y enrolled student membe	expenses or damages which may result such damage or injury is the direct results/ rs/officers only. Advisor must accompa	from my in the student	
Print Name	LCC Username (@mail.lcc.edu)	Signature	Date	

By completing the following, I agree to abide by the Lansing Community College Student Code of Conduct and hereby fully release Lansing Community as to account of any losses, expenses or damages which may result from my participation in the student organization travel listed above unless such damage or injury is the direct result of a negligent act or omission by LCC and not caused in part by my own negligence.

Travel is for RSO advisor(s) and currently enrolled student members/officers only. Advisor must accompany the student organization during the entire travel. Students under the age of 18 must also complete and submit the LCC Release and Hold Harmless Agreement prior to travel.

Print Name	LCC Username (@mail.lcc.edu)	Signature	Date