

Excursion Form



To be completed by the relevant Faculty at Curtin University:

Faculty : _____

Date of excursion : _____

Accompanying University employee: _____

Brief description of planned excursion activities:

Student Information (please attach a list of the participating students and student declaration details form):

Number of Students: _____

Declaration to be completed by the supervising University employee.

I _____ (please print your full name) hereby acknowledge and understand that the students referred to in the attached list are participating in an excursion and associated activities related to Curtin University, Malaysia at their own risk and that Curtin does not provide personal accident insurance for students not enrolled in any of its academic courses or participating voluntarily on this activity. Those who are enrolled will be covered under Students' Group Personal Accident insurance.

I have ensured that all the Students have read the terms and condition of both forms (Excursion Form and Declaration Form) and before the field trip starts, I have read the terms out to the student.

Supervising employee signature : _____ Date: _____

Contact No. : _____

Please forward completed form to the Manager of Student Services for signature.

Manager of Student Services signature: _____ Date: _____

