

Student Domestic Travel Agreement

General Conduct and Travel Requirements

By participating in University Student Travel, I agree to the following responsibilities:

- I will follow all university policies and procedures during the trip, including OP 91.305 Domestic Travel by Students, OP 91.100 Code of Student Conduct, the Sexual Misconduct Policy, and applicable department or student organization policies and procedures. Failure to comply may result in disciplinary action.
- I will conduct myself responsibly and maturely, reflecting positively on my department/organization and Mississippi State University (MSU).
- I will participate in all required aspects of the event for which I am traveling. My department may establish a schedule of fines for failure to participate.
- I am responsible for knowing and abiding by all laws and regulations, including those related to the use and possession of alcohol and drugs.
- If I am unable to return with the group due to my actions, I am responsible for the cost of my own return transportation.
- If I fail to participate in the trip after expenses have been incurred by my department or organization, I will be responsible for repaying those expenses. Any damages caused by me during the trip will also be my responsibility.

Emergency Procedures

- In a serious emergency, I will contact 9-1-1 or the nearest emergency service or law enforcement agency.
- I will report the emergency to my sponsor, department representative, or other supervising adult as soon as it is safe to do so.
- I understand that MSU is not responsible for medical costs incurred during or as a result of the trip, including travel to and from the activity.
- In the event of a serious or ongoing emergency, I will contact the University Police Department at (662) 325-2121when it is safe to do so.
- For non-emergency assistance, I will contact the University Police Department or email studenttravel@msstate.edu.

Risk Management and Safety Considerations

- I understand that travel carries inherent risks, and I will educate myself on any potential dangers at my destination.
- I will comply with all safety instructions provided by trip personnel or event organizers.
- I will carry any necessary medical insurance information, required medications, and emergency contact details during the trip.
- If group transportation is provided, I will use the designated transportation unless otherwise approved. I will be responsible for any increased costs related to my actions.

Student Driver Verification (for Drivers Only)

If I am driving a vehicle during University Student Travel, I further agree to the following additional responsibilities:

- I possess a valid U.S. driver's license and am trained and experienced in operating the vehicle I will be driving.
- For personal vehicles: I confirm that my vehicle is insured and meets the minimum insurance requirements of its state of registration.
- For rental vehicles: I understand that liability and physical damage insurance are recommended when the vehicle is not driven by a university employee.
- I will obey all traffic laws, speed limits, and posted traffic control signs and regulations.
- I will limit my driving time as follows:
 - o No more than four (4) hours of continuous driving without a break.
 - o No more than ten (10) hours of total driving time in a 24-hour period.
- I will not use a mobile device while driving if transporting passengers.
- If traveling with others, I will ensure that at least one passenger remains awake to assist with navigation and maintain driver alertness.
- I will exercise caution during adverse weather conditions and adjust travel plans based on weather advisories.
- I will ensure the vehicle is properly maintained and equipped with necessary safety features.
- I understand that if I use my personal vehicle for university travel, I do so at my own risk and am responsible for my own auto physical damage and liability insurance.
- I understand that students are not covered by university insurance during domestic travel and will ensure I have appropriate health insurance coverage.
- I will report any incidents that occur during travel to my trip organizer.

Acknowledgment and Agreement

By signing below, I affirm that I have read, understand, and will comply with these requirements while participating in University Student Travel.

| Student Name (Printed): | |
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| Student Signature: | Date: |