

REQUEST FOR FIELD GEOLOGY COURSE

STUDENT INFORMATION:

Name: _____ Student ID: _____
Contact Information - Email: _____ Phone: _____
Academic Level: _____ Term: _____

Choose one:

Register for GEO 4933 and GEO 4943 Geology Field course I and II

Attend a geology field course/camp outside of UTSA

Name of University: _____ Location: _____

Required: Attach a course syllabus or field camp information

ACKNOWLEDGEMENT FOR UTSA GEOLOGY FIELD COURSE/CAMP (please initial next to each indicating that you have read and understand the following):

_____ Participation in this trip requires: walking or hiking outside without a trail on uneven, inclined surfaces for extended periods of time and without shelter from weather conditions. By submitting this form and signing it, I acknowledge that I am responsible for administering my own medicine and devices and will carry emergency medicine/devices on the trip. In addition, I acknowledge that I also have the option to engage the Department and /or the Office of Student Disability Services regarding requests for reasonable accommodation.

_____ Students attending field camp are required to carry health insurance for the duration of the field camp. Please provide the name of your insurance provider (If you don't have insurance and plan to get it by the start of camp, please indicate below):

Name of insurance provider or if you plan on obtaining insurance before the start of camp.

SIGNATURE:

Student Date

APPROVALS:

Field Course/Camp Coordinator Date Approve Disapprove

Department, Undergraduate Advisor of Record Date Approve Disapprove

Department Chair Date Approve Disapprove

Note: If disapproved, student is to meet with the department's undergraduate advisor of record.