Pre-departure notification for off-campus activities in rural/remote areas

This form should be lodged with the Head of academic/administrative unit or their nominated delegate prior to the trip commencing. All details should be supplied with the completed checklist.

Academic/Administrative Unit: ________________________________

Off-campus activity: ________________________________

Destination(s) (include map and references): ________________________________

Date(s): ________________________________

Accommodation Booked: ________________________________

Participants

Note: The recommended staff/student ratio is 1:10 and a ratio of less than 1:20 is not advisable. Where possible, there must be male and female supervisors for activities involving male and female students.

(If preferred, attach a list). Please indicate participant status (staff member, postgraduate, honours or undergraduate student, volunteer)

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<tr>
<th>Participant Name</th>
<th>Participant status</th>
<th>Participant ID Number</th>
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Safety Officer: ________________________________

Qualified First Aiders (name and level)

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Mental Health First Aider(s)

________________________________________________________________________

________________________________________________________________________

Vehicles

Vehicle 1:

Make: ______________________  Registration: ______________________

Model: ______________________  Fuel type: ______________________

Colour: ______________________

Vehicle 2:

Make: ______________________  Registration: ______________________

Model: ______________________  Fuel type: ______________________

Colour: ______________________

Equipment carried

Please tick the box and indicate the number where applicable.

- First aid kit
- Tent
- Food for ________ days
- Water (______ litres)
- Fuel (______ litres)

Communication

Transceivers (Make & model type): ________________________________

Phones (Make & model type): ________________________________

Phone numbers: (1) ____________________________  (2) ____________________________

Trip details

Departure:  Time:_________________  Date: ____________________________

Proposed Route: ________________________________

ETA destination:  Time:_________________  Date: ____________________________
Proposed Return Route: ____________________________________________________________

Return ETA:       Time: _______________      Date: ____________________________

Notification Deadline:   Time: _______________      Date: ____________________________

Remember to inform __________________________________ upon your return

Staff member(s) in charge:

Name: ______________________ Signature: ______________________ Date: ____________

Name: ______________________ Signature: ______________________ Date: ____________