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: __________________________
- Model: __________________________
- Colour: __________________________
- Registration: _______________________
- Fuel type: __________________________

**Vehicle 2:**
- Make: __________________________
- Model: __________________________
- Colour: __________________________
- Registration: _______________________
- Fuel type: __________________________

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: __________