



Idaho State University

Clery Act Student Travel Form

Please complete this form AFTER THE TRIP for ISU-sponsored overnight student travel for academic course work, conferences, athletics, clubs/organizations, class field trips, etc.

Student Group Name or travel purpose: _____

Lodging Facility Information (i.e., hotel, Airbnb, etc.)

Complete one form for each lodging facility used. List multiple room numbers used in the same hotel on one form.

Lodging Facility Name	Check-in Date	Check-out Date
Address		
City	State	ZIP Code
Specific room number(s), floor(s) occupied		

Additional Space Rented (i.e., classrooms, labs, practice fields, etc.)

Complete one form for each additional facility rented for students on the trip (besides lodging).

Facility Name	Facility Rent Begin Date	Facility Rent End Date
Address		
City	State	ZIP Code
Specific room number(s), floor(s) occupied		
Purpose for using the facility		

Group Leader or Department Travel Contact:

First and Last Name	Title
Department	Contact Information

Submit completed form to clery@isu.edu

For questions, contact the Clery Compliance Coordinator at (208) 282-2850