

Appendix B: Travel Proposal Template

Please submit the following information to the International Travel Oversight Committee (ITOC) at itoc@wustl.edu. Forms should be submitted at least 3 weeks before departure.

Submitter's name: Submitter's email:

Group Leader's name (if different than submitter): Group Leader's email:

Name of sponsoring school/department or organization:

Group/Trip Name: Trip Dates:

List the countries and cities that you will be visiting:

<u>Country</u>	<u>City</u>	<u>Arrival Date</u>	<u>Departure Date</u>
1)			
2)			
3)			

Section 1: Program Details

1) Briefly explain the academic relevance, purpose, and an overview of planned activities of the program.

2) Anticipated number of WashU undergraduate students who will be participating in this program:

3) Anticipated number of WashU graduate students who will be participating in this program:

4) Anticipated number of WashU faculty and/or staff members who will be participating in this program:

Section 2: Accommodations and Transportation

1) List an accommodation for each city on your travel itinerary, including in-transit cities.

<u>Accommodation Name</u>	<u>Address</u>	<u>Anticipated Arrival Date</u>	<u>Phone # (Country + City Code)</u>
1)			
2)			
3)			

2) Provide a brief overview of the accommodations (hotel, hostel, host family, apartment, dorm, campsite, etc), including how they were chosen and/or vetted for safety and security.

3) Describe the transportation methods for each location on your itinerary, including transportation to and from the work/study site. Is your in-country partner arranging transport? If WashU faculty/staff are driving, please include that information. Please note - local auto liability and physical damage insurance must be purchased from the rental agency if faculty/staff rent and drive vehicles outside of the U.S., U.S. Territories, and Canada.

Section 3: Emergency Support, Contact Information, and In-Country Communication Plan

For each of the following items, please indicate whether that step has been completed:

- 1) Identified the nearest U.S. Embassy or Consulate to your destination(s). Yes No
- 2) U.S. citizens have enrolled in the STEP program (<https://step.state.gov/STEP/Pages/Common/Citizenship.aspx>): Yes No
- 3) Does the Department of State currently have a Travel Warning or Alert for your destination(s)? (Review at travel.state.gov) Yes No
- **If yes, you must also complete the supplemental information in Section 4 of this form.**
- 4) Located the city/country 911 Emergency Equivalent number for Police, Fire, and Ambulance: Yes No
- 5) All travelers have enrolled in the appropriate insurance (GeoBlue). See <https://global.wustl.edu/international-policies-resources/health-insurance/> for additional information on insurance options. Yes No
- 6) Consulted the CDC's recommendations regarding vaccinations (<http://wwwnc.cdc.gov/travel>) for each destination on your itinerary: Yes No
- 7) Does the CDC currently have an alert or warning in place for your destination(s)? Yes No
- **If yes, you must also complete the supplemental information in Section 4 of this form.**
- 8) All travelers have recorded the ISOS phone number and membership number and will keep it with them for the duration of the trip. See <https://global.wustl.edu/resources/international-sos> Yes No
- 9) What are the current ISOS travel and health risk ratings for your destination(s)? See

<https://www.internationalsos.com/>.

****If "high" or "extreme", you must also complete the supplemental information in Section 4 of this form.**

10) If applicable, please provide the name of your in-country partner and/or host organization. Please list all partners if there are more than one. Also include phone numbers (country + city code) to be used in case of an emergency.

11) In the event of an emergency, how can you be reached? Please include your local mobile number (if applicable) as well as other means of communication (email, Facebook, Twitter, etc). If you list social media, please list your username.

12) Who is the WashU contact that will be in the U.S. while the group is abroad? Please provide a name, an after-hours number, and an email.

13) Training & Orientation: Will the group participate in one or more trainings to prepare for logistical and cultural issues, as well as rules and expectations, emergency health, and safety and security information? Yes No

14) I will verify all participants register this trip in the travel registry (<https://mytrips.wustl.edu>) Yes No

If you are traveling to a low-risk location, skip ahead to sign and date the bottom of this form. Do not complete Section 4.

Section 4: Supplemental Information

****This section is only required if your destination(s) is considered high-risk by the CDC, ISOS, or the Department of State. Please see questions 3, 7 and 9 in Section 3 of this form for additional clarification of ratings. ****

1) Which agencies have assigned travel warnings/alerts to your destination(s)? CDC ISOS Dept. of State

2) Please explain the risks and/or conditions that led to the issuance of a warning.

3) What steps will you take to mitigate these risks?

4) Please explain why your objectives could not be achieved in another, less risky location.

5) Is there any additional information that you would like the ITOC Executive Board to consider when evaluating your travel proposal?

Please sign and date below.
