

Student Information for International Travel Authorization Request

You must obtain travel authorization prior to departure

6 – 3 months prior to departure – ideal timing to allow for plan B if needed

- Identify risks at your destination and determine how to mitigate them. utdallas.edu/rs/travelerguide/
- Identify visa and vaccination requirements. utdallas.edu/rs/travelerguide/
- Request a security expert to review the trip itinerary if traveling solo or are unfamiliar with the destination. utdallas.edu/rs/rspdo/
- Access UT Dallas resources or your physician to help you plan managing health conditions during your trip.
 - Student Health Center: <http://www.utdallas.edu/healthcenter/>
 - Student Counseling Center: <http://www.utdallas.edu/counseling/>
 - Center for Students in Recovery: <http://www.utdallas.edu/recovery/>
 - Student AccessAbility: <http://www.utdallas.edu/studentaccess/>
- Request risk authorization if needed.** utdallas.edu/rs/hrr/. Risk authorization, when applicable, is a required step to obtain travel authorization. Wait for risk authorization before purchasing tickets, applying for visas, etc.

Lack of trip registration in ISOS or missing information or documents will delay travel authorization

6 – 4 weeks prior to departure

- Develop a Personal Emergency Action Plan (PEAP). Use the PEAP template developed by the International Center (utdallas.edu/rs/files/PEAP_template.pdf) or create your own (<https://icrsoblog.wordpress.com/category/peap/>)
- U.S. Citizens or UTD groups. Register the trip in STEP. (<https://step.state.gov/step/>) Non-US citizens should follow any similar guidance provided by their country of citizenship.
- Review your insurance benefits, exclusions, coverage period, and fee: utdallas.edu/rs/insurance/
- Collect all travel authorization required documents listed below and give them to your RUO.** The department arranging, funding, organizing or sponsoring the trip is considered the RUO. For students traveling on education abroad programs, unless otherwise determined, Education Abroad is considered the RUO.
 - This form, with all your information and your signature.
 - Copy of your passport ID page.
 - If you will need a letter of medical, evacuation and repatriation coverage for visa purposes, include the official requirements for the letter specified by the country embassy, or institution.
 - If you will travel to Cuba, include the forms listed, find links for them at utdallas.edu/rs/cuba-travel/:
 - The Cuba Travel Affidavit form, and
 - The Certification of Activity for Travel to Cuba filled out and signed by your RUO.
 - Ask your RUO to fill out and sign the B14-F form. The RUO will include the B14-F form in the travel authorization request. If you are traveling with a group, only one B14-F form is needed for the group.
- Register the trip itinerary in International SOS (ISOS).** Follow instructions on the page. Register any side trips as soon as you have itinerary details for them. utdallas.edu/rs/isos/mytrips/.
- Ask your RUO to submit all the required documents for the trip to** International Risk and Safety at IRSO@utdallas.edu.
- Monitor risks at your destination and plan to mitigate them. utdallas.edu/rs/travelerguide/

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- Travel authorization prior to departure is required for trips in, to, or from a destination NOT in the United States or Puerto Rico.
- Submit this form and additional required documents at least 6 - 4 weeks prior to departure. See pg 1 for instructions.
- For International travel, students include Research Assistants, Teaching Assistants, and Teaching Associates.

Student Traveler Information

Traveler Name _____ Net ID _____
24/7 phone (in an emergency the International Center may need to reach you) _____

Activity Information

Student travelers will be covered by the UT System International Travel Insurance Plan based on the authorized official activity dates. Coverage will include a personal deviation period of 2 weeks immediately before and after the official activity dates. These weeks are set and cannot be moved. Students will be charged a fee for this insurance. See utdallas.edu/rs/insurance for benefits, coverage period, and fee details.

Official Activity Dates (mm/dd/yy). Ex. Conference dates, program dates. Start date _____ End date _____
If traveling outside of the coverage period on an activity not authorized by the University please arrange for your own coverage. You have the option of purchasing a personal ISOS membership for leisure travel that includes medical insurance. If you use the UTD Membership ID# 11BSGC000037 you can obtain a discount. <https://buymembership.internationalsos.com/compare/>

Estimated Travel Dates (mm/dd/yy). Review your coverage period. See above notes from _____ through _____

Destination(s) (city (ies), country) _____

Activity Description. (See examples at: utdallas.edu/rs/international-travel/). Briefly state the purpose of the trip; state if you intend to obtain credit or meet academic requirements with this activity; if the trip is not academically related, state how the activity will benefit the University.

Lodging information. Enter name of anticipated lodging location(s), address, phone number (as dialed from the U.S.) and estimated dates you will be there. If needed submit in a separate page. We want to be able to give ISOS a dot on a map in case of emergency, such as evacuation. Ex. Jan 02 to 11. Holiday Inn. Address: 4 Rue Danton, 75006 Paris, France. Phone: +33 1 81 69 00 60

Mode of Transportation.

Traveler Name _____	Net ID _____
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Student Traveler Medical Information. If you have any concerns about how to manage health conditions during your international trip, please know UT Dallas offers many resources that can assist you.

- Student Health Center: <http://www.utdallas.edu/healthcenter/>
- Student Counseling Center: <http://www.utdallas.edu/counseling/>
- Center for Students in Recovery: <http://www.utdallas.edu/recovery/>
- Student AccessAbility: <http://www.utdallas.edu/studentaccess/>

Insurance. Student travelers will be covered by the UT System International Travel Insurance Plan based on the authorized official activity dates. See utdallas.edu/rs/insurance for benefits, coverage period, and fee details. **All students are strongly encouraged to maintain their U.S. health insurance coverage in case treatment is necessary upon return to the United States.**

To get Emergency and Travel Assistance during this trip call International SOS 24/7 to +1 215-942-8059.

Physician Name _____

Office phone _____ Emergency phone _____

Dentist Name _____

Office phone _____ Emergency phone _____

Blood type, (select one) O+ O- A+ A - B+ B- AB+ AB-

Date of last Tetanus/Diphtheria Inoculations (mm/dd/yy) _____

Allergies _____

Medication(s) you are taking, including dosage _____

Special Health Needs or Concerns _____

Student Traveler Authorizations

Emergency Medical Authorization

I authorize UT Dallas and its designed representatives to consent, on my behalf, to any medical/hospital care or treatment to be rendered upon the advice of any licensed physician. I agree to be responsible for all charges incurred by any hospitalization or treatment rendered pursuant to this authorization.

Release of Information Authorization

I authorize UT Dallas and its designated representatives to release information regarding my wellbeing to the people noted below during the University Activity and/or Travel described in this travel request, in case of any civil unrest, natural disasters, medical emergencies or other exigent circumstances that may occur near or in the country:

Name _____ Relation _____

Day phone _____ Night phone _____

Name _____ Relation _____

Day phone _____ Night phone _____

Student Traveler Release and Indemnification Agreement

I have voluntarily applied to participate in the University Activity and/or Travel described in this travel request. I acknowledge, understand and agree to the following:

- I accept all risk to my health and of my injury or death that may result from my participation in the Activity and/or Travel, including transportation and all other adjunct activities.
- I acknowledge the nature of the Activity and/or Travel could possibly expose me to hazards or risks that could result in my illness, personal injury or death. I understand and appreciate the nature of such hazards and risks. I acknowledge there may be additional hazards and risks associated with the foreign travel that is involved.
- I understand that all students traveling abroad are required to enroll in the Student International Travel Accident and Sickness policy, an umbrella program provided by UT System, prior to departure. I have taken the necessary steps to enroll in this coverage prior to departure for this Activity and/or Travel. See: utdallas.edu/rs/insurance/.
- I understand that if I do not comply with all the rules, code of conduct, and instructions relating to this Activity and/or Travel, UT Dallas has the right to terminate my participation in this activity without refund.
- I understand that UT Dallas in no way represents, or acts as agent for any entity including any foreign University, the transportation carriers, or other suppliers of services connected with this Activity and/or Travel.
- I understand that if I have legal problems with foreign nationals or the government of the host country, I am solely responsible for resolving the matter and UT Dallas is not responsible for providing any assistance.
- I grant UT Dallas and its designed representatives full authority to take whatever actions they may consider to be warranted under any circumstances regarding the protection of my health and safety during my participation in the University Activity and/or Travel described in this travel request.
- In consideration of my participation in the Activity and/or Travel, I release UT Dallas, its governing board, officers, employees and representatives from any liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any and all illness or injury to my person, including my death, that may result from or occur during my participation in the Activity and/or Travel, whether caused by any type of negligence of UT Dallas, its governing board, officers, employees, or representatives, or otherwise.
- I further agree to indemnify and hold harmless UT Dallas and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional act or omission while participating in the described Activity and/or Travel.
- This agreement shall be construed in accordance with the laws of the State of Texas, which shall be the forum for any lawsuits filed under or incident to this agreement or Activity.
- **I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY INJURY OR DEATH OR DAMAGE TO MY PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE ABOVE DESCRIBED ACTIVITY AND/OR TRAVEL AND THAT IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY NEGLIGENT OR INTENTIONAL ACT OR OMISSION.**

Student Traveler Acknowledgements

Travel

- I understand institutional travel authorization prior to departure is required. See: utdallas.edu/rs/student-authorization/
- I understand registration of my trip in International SOS prior to departure is required. See: utdallas.edu/rs/isos/

UTD-owned devices or property

I agree to the following statements pertaining to my use of and responsibility for UTD-owned devices or property while I travel internationally on behalf of UT Dallas:

- I will ship or hand-carry the items, technology, or software as a "tool of the trade" to conduct UT business only;
- I will return the items, technology, or software to the U.S. no later than 12 months from the date of leaving the US unless the items, technology, or software are certified by me to have been consumed or destroyed abroad during this 12 month period;
- I will keep the items, technology, or software under my "effective control" while abroad (defined as retaining physical possession of item or keeping it secured in a place such as a hotel safe, a bonded warehouse, or a locked or guarded exhibition facility);
- I will take security precautions to protect against unauthorized release of the technology while the technology is being shipped or transmitted and used abroad such as: a. use of secure connections when accessing e-mail and other business activities that involve the transmission and use of the technology, use of password systems on electronic devices that store technology, and use of personal firewalls on electronic devices that store the technology;
- **I will not ship or hand-carry the items, technology or software to Iran, Syria, Cuba, North Korea, or North Sudan.** If I am planning to travel to these countries, I will consult UT Dallas' Export Controls Officer in the Office of Research.

Student Traveler signature. *Your signature indicates that you are 18 years of age or older and that you are in agreement with the terms and conditions on this form.*

Name (print)

Signature

Date