

International Travel

Student organizations traveling outside of the United States are required to complete an International Travel Package as listed below. Required forms and documentations will need to be reviewed and approved by the appropriate departments and staff. All travelers are also required to complete and have approved travel forms and purchase risk management insurance. This can be a long process and will need to be all completed and turned in to Financial Services no later than 3 months prior to departure.

International Travel Package Checklist:

1. Authorization to Travel Form (per group)
2. Release of Liability Form (per traveler)
3. Authorization for International Travel (one per group)
4. List of Attendees
5. Emergency Contact List
6. Flight and Hotel Information
7. Risk Management Insurance
8. Document Confirming Purpose of Trip
9. Copy of Advisor's Authorization to Travel on State Business (if Advisor is traveling)

Approval Process:

1. Review by ASI Executive Director – Account Status in ASI Financial Services
2. Review by Associate Vice President/Dean of Students – Registration/Good Standing
3. Review by Vice President/Student Affairs – Registration/Good Standing
4. Required Approval and Purchase of Insurance by Risk Management



Filling in the International Travel Form

(Refer to page 33 for Authorization for International Travel form)

The approval process for the Authorization for International Travel form may take several days or even a few weeks. Despite so, the forms and package needs to be completed and fully approved and submitted to ASI Financial Services 3 months prior to departure. Several specific signatures are needed and cannot be substituted with a Universal Signer so plan accordingly!

1. The name of the traveling organization and a primary contact information. The email provided must be checked daily and often throughout the entirety of the trip.
2. Provide a purpose for the travel.
3. Estimate the travel expenses to be incurred and indicate which account(s) the funds will be taken out from.
4. The location where the organization is traveling to. The more specific, the better.
5. Check each of the three links provided and indicate if the country/region that your group is traveling to is listed on any of the high risk countries lists.
6. Provide detailed information about the organization's flight and lodging accommodations.
7. The name and signature of the student requesting the authorization and the name and signature of an advisor. A Universal Signature cannot be used and will not be accepted.
8. Submit the filled in Authorization for International Travel form to Financial Services to be reviewed. Once the form has been reviewed and approved, the organization will be contacted to pick up the signed form. Then the form is to be submitted to the Associate Vice President for further review and approval.
9. Student travelers are required to have approval and purchase of insurance by Risk Management.
For more information visit the Cal Poly Pomona website under University Risk Management <https://www.cpp.edu/~rms/risk-insurance/insurance/index.shtml>
10. Provide a list of emergency contacts for each traveler. Include a telephone number and email that the contact can be reached at.



For Office Use Only TA#

AUTHORIZATION FOR INTERNATIONAL TRAVEL

THIS FORM MUST BE SUBMITTED AT LEAST 30 DAYS IN ADVANCE OF DEPARTURE DATE.

In compliance with CSU Executive Order 1041, we hereby request authority for international travel to the destination/s, on the dates, and for the purpose indicated below:

REQUESTING ORGANIZATION: SAMPLE FORMS SOCIETY **1** TODAY'S DATE: 10/12/16

TELEPHONE CONTACT DURING DURATION OF TRIP: (626) 987-6543 **1** EMAIL: JANERO@SAMPLE.COM

2 PURPOSE OF TRAVEL: TO ATTEND THE INTERNATIONAL CONVENTION OF SAMPLE FORMS
AND EXPERIENCE DIFFERENT CULTURES OF SAMPLE FORMS TO GAIN THE
KNOWLEDGE NEEDED TO CREATE NEW INNOVATIVE FORMS

FUNDING FOR TRAVEL: ESTIMATED TRAVEL EXPENSE: \$ 3,500

<u>SAMPLE FORMS SOCIETY</u> Account Name	<u>S30123</u> Account Number	<u>\$ 2,000</u>
<u>SAMPLE FORMS SOCIETY</u> Account Name	<u>171234</u> Account Number	<u>\$ 1,500</u>

LOCATION(S) AND DATES OF TRAVEL-INCLUDE COUNTRIES AND CITIES/REGIONS OF TRAVEL: (Attach additional travel locations)

4 SHIBUYA, TOKYO, JAPAN 2/13/16 - 2/17/16
Country and Cities/Regions Departure and Return Dates
Country and Cities/Regions Departure and Return Dates

INDICATE IF ANY OF THE LOCATIONS WHERE YOU WILL TRAVEL ARE ON THE FOLLOWING LISTS:

- 5** High Hazardous List: http://www.calstate.edu/risk_management/rm/documents/CSURMA_HighHazardList.pdf
 War Risk: http://www.calstate.edu/risk_management/rm/documents/CSURMA_HighHazardList.pdf
 U.S. State Department Travel Warning List: <http://travel.state.gov/content/passports/en/alertswarnings.html>

FLIGHT INFORMATION:

6 AMERICAN AIRLINES 2/13/16 5AM 2A345 2/17/16 5PM 6B789
Airline Carrier Departure Date/ Time Flight # Returning Date/ Time Flight #

LODGING INFORMATION:

APA HOTEL 81 3-6416-7111 20-1 Maruyamacho, Shibuya, Tokyo 150-0044, Japan 2/13/16 - 2/17/16
Lodging Facility Phone Number Address Period of Stay
Lodging Facility Phone Number Address Period of Stay

REQUESTED BY:

7 STUDENT: JANE RODRIGUEZ 10/12/16
Print Name Signature Date
ADVISOR: JOHN PATEL 10/12/16
Print Name Signature Date

We understand and agree that when approvals for foreign travel are obtained, the travelers will purchase the CSURMA FTIP insurance coverage from University Risk Management. Please allow for two weeks prior to the departure date to purchase the insurance.

REVIEWED BY:

8

ACCOUNT STATUS IN ASI FINANCIAL SERVICES:

		\$	
ASI Executive Director	Date		Account Balance

REGISTRATION AND GOOD STANDING STATUS:

Associate Vice President / Dean of Students	Date

Vice President for Division of Student Affairs	Date

REQUIRED APPROVAL & PURCHASE OF INSURANCE:

RISK MANAGEMENT

9

University Risk Manager	Date

ADDITIONAL APPROVAL REQUIRED (Mark N/A if not needed):

For Travel to Countries on the High Hazardous, War Risk, and/or U.S. State Department Warning List

University President	Date

CHECKLIST-REQUIRED ATTACHMENTS:

For All International Travel Requests:

- Estimated Travel Expense Form
- Financial Report Showing Available Balance
- List of Travelers and Emergency Contact Information
- Trip Documentation (Conference Brochure)
- Release of Liability, Promise Not to Sue, Assumption of Risk and Agreement to Pay Claims Form (If minor, under 18 years, must be signed by parent/guardian)

For All High-Hazard and War-Risk Destinations:

- List of accompanying University employees names, titles and contact information (email and phone)
- Written explanation if there is no accompanying University employee
- Memo from Area/Division Vice President in support of travel

