

Date:

To: Whitney J. Fields
Executive Director of Institutional
Risk & Emergency Management

Copy:

From:

Subject: **Staff or Student** Request for Approval of International Travel

TRAVELER'S INFORMATION:

Name:

Email Address (used while traveling):

International Phone (optional):

Name of faculty or staff advisor to accompany student (if applicable):

Traveler's Status (check one): Staff Student Other (specify/describe)

Travel Dates (Departure and Return):

Destination (Country(s) and City/Town or Region(s) of travel):
Attach additional documentation if needed.

Request for travel. Please include- **Justification/Purpose** for travel, nature of **activities**, and **source of funding**. Attach additional documentation if needed.

TRAVELER'S EMERGENCY CONTACT INFORMATION:

Name of U.S. Emergency Contact:

U.S. Emergency Contact phone number or email:

If travel request is less than 5-day notice please provide reason for late request:

COMMENTS:

- Check to confirm your enrollment in the Smart Traveler Enrollment Program (STEP)
<https://step.state.gov/step/>

Travel Advisories: (Check box if "YES"):

- Does the country of travel have a U.S. State Department "Level 3" or "Level 4" Travel Advisory?
<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html>

If yes, approval of campus President required.

CSURMA [High Hazardous Country List \(CSURMA\) \(PDF\)](#)

- Are any of the travel destinations on the **CSURMA High Hazardous Country List**?

If yes, approval of campus President is required.

- Are any of the travel destinations of the **CSURMA War Risk Country List**?

If yes, approval of campus President and Chancellor's Office is required.

If any of the above boxes are checked, i.e., travel is to a country with an Advisory "Level 3" or "Level 4", and/or country appears on the CSURMA High Hazardous or War Risk Country lists, please provide the following information:

Lodging Name:

Lodging Address:

Lodging Phone:

Mode of travel: Public Transportation Rental Vehicle Plane Other (specify)

Airports used while traveling:

Additional security measures being taken (response required):

REVIEW/APPROVAL:

Approved

Denied

Whitney J. Fields, Executive Director of
Institutional Risk & Emergency Management

Date: _____

Approved

Denied

Soraya M. Coley, President

Date: _____

ATTACH:

Cal Poly Pomona **Employees**, attach the following documents to this request if applicable:

- [Authorization to Travel on State Business Form](#)
- Travel Expense Documentation

Cal Poly Pomona **Students**, attach the Release of Liability Form to this request:

- [Student Travel Release Notice - Part 1 \(Please review\)](#)
http://www.cpp.edu/~rms/docs/stud_travel_release_notice.pdf
- [Release of Liability Form](#)
http://www.cpp.edu/~rms/docs/Activity_Release.pdf

If using Foundation funds for travel, please fill out the Foundation Authorization to Travel:

- [Foundation Travel Policy](#)
- [Travel Authorization and Expense Report Form](#)

REFERENCE:

For additional information, please visit the Cal Poly Pomona Risk website:

- <http://www.cpp.edu/~rms/index.shtml>

NOTE: When travel is approved and coverage is bound, you will be sent confirmation of coverage and the premium amount due. For information regarding CSU Foreign Travel Insurance Program refer to the Risk Management website at: <http://www.cpp.edu/~rms/docs/ftip.pdf>