University of Cincinnati  
TRAVEL EXEMPTION FORM

I am filing this petition with the International Travel Oversight Committee on behalf of

___ myself (individual travel)  ___ a group (student organization or faculty-led study abroad)

Name: ____________________________  M number: ____________________________
Email: ____________________________

I am a:  ___ student
(Are you over the age of 18? ___ If not, additional consent will be required for travel)

___ faculty member  ___ staff member

This international travel awards academic credit:  ___ yes  ___ no

Destination of travel: ____________________________  Dates of travel: ____________________________

Purpose of travel and specific activities: ____________________________

Local contacts and arrangements for housing and transportation: ____________________________

Please review the US Department of State Travel Warning (http://travel.state.gov) as well as any warning issued by the Center for Disease Control (www.cdc.gov) and attach the following:

• A detailed itinerary for the travel that includes country (-ies), regions, cities and specific sites
• A statement explaining why you believe that the risk associated with the proposed travel are manageable, specifically addressing the reasons for the travel warning, along with any contingency plans you have developed
• A statement that you have read the US Department of State Travel Warning and understand the risks related to travel to your particular destination.

A scanned version of this form should be submitted via email to global@ucmail.uc.edu to UC International.

By my signature, I attest that all of the information relevant to this petition is accurate and up-to-date at this time.

Signature: ____________________________  Date: ____________________________

Dean/Department Head/ Advisor:

Note: By signing here you are not endorsing nor disapproving the petition. Your signature is an acknowledgement of this proposed travel. By signing, you will be copied on email communication with the individual submitting the petition. If you would like to submit additional information, please contact Dr. Anne Sheridan Fugard (anne.fugard@uc.edu) in UC International.

Signature: ____________________________  Date: ____________________________