

# INTERNATIONAL TRAVEL BY A STUDENT GROUP REPORTING FORM 2008-09

If you have questions about this form, want to provide additional information about the proposed international activity, or want to consult on best practices, please feel free to contact Pardip Bolina at bolina@illinois.edu.

**DEADLINES:**

- **Winter Break: Oct. 15, 2008**
- **Spring Break: Feb. 25, 2009**
- **Summer: April 8, 2009**

**RETURN TO:**

Study Abroad Office  
115 Int'l Studies Bldg., MC 480  
Tel: 217-333-6322, Fax: 217-244-0249  
Email: bolina@illinois.edu

<b>PROGRAM SPONSORSHIP</b>	
<i>Name of student group</i>	
<i>Dates of program</i>	
<i>Country/Countries</i>	
<i>City/Cities</i>	
<i>Group leader name</i> <i>Email</i> <i>Group leader's US cell number AND cell number leader can be reached at while abroad</i>	
<i>Host institution(s) abroad with contact information</i>  <i>Host contact person(s) name and cell number</i>	
<i>Faculty advisor (if any) name and contact information</i>	
<i>If this program or tour is co-sponsored with another U.S. institution(s), give name(s) and contact(s) for institution(s) and liaison(s)</i>	
<b>PARTICIPANTS</b>	
<i>Number of undergraduate students</i>	
<i>Number of graduate students</i>	
<i>Number of accompanying faculty/staff</i> <i>*Faculty/staff traveling abroad must complete a separate "faculty/staff activity abroad form" to register and pay for international insurance.</i>	
<b>ATTACH LIST OF PARTICIPANTS &amp; STAFF (include net ids)</b>	

<b>PROGRAM DETAILS &amp; FACILITIES</b>	
<b>ACCOMMODATIONS:</b> Provide addresses and contact information	
<i>How were these accommodations selected? Recommended by local institution, past participants, etc?</i>	
<b>MEALS:</b> How and where will meals be provided?	
<b>LOCAL TRANSPORTATION:</b> How will students commute on a daily basis? What is the method of transport between cities?	
<b>INTERNATIONAL TRAVEL:</b> How will participants reach the program destination and return back to the US?	
What travel agency is being used, if any?	
<b>ATTACH FLIGHT ITINERARY</b>	
<b>ATTACH PROGRAM ITINERARY:</b> Please describe day-to-day plans and any planned excursions. Include method of transportation, accompanying responsible person and provisions for accommodations.	
<b>HEALTH &amp; SAFETY</b>	
<p><b>There is a nominal cost for insurance coverage based on time spent abroad: \$25 admin fee + insurance fee of: \$20.50 up to 14 days, \$28.50 15-28 days, \$67 4-10 weeks</b></p> <p style="text-align: center;"><b>OR</b></p> <p><b>for groups traveling more than 10 weeks, there is \$50 admin fee + insurance fee of \$115 10 weeks -6 months, \$273 6-10 months, \$321 10-13 months.</b></p>	
<b>BILLING:</b> Have participants been informed that their student accounts will be billed for the insurance and admin fees listed above? If a department on campus is paying for the above fees, please provide the dept's name and their fopal number?	
<b>RECORDS:</b> Have participants been informed that they must turn in a copy of their passport to the Study Abroad Office?	
<b>WAIVERS:</b> Have participants been informed that they must log in to the SAO website ( <a href="http://www.studyabroad.uiuc.edu">www.studyabroad.uiuc.edu</a> ) to sign all necessary waivers and provide emergency contact information as well as travel dates?	
<b>ORIENTATION:</b> When and how will pre-departure orientation be delivered? When will students review the Study Abroad Office	

<b>Health and Safety PowerPoint?</b>	
<b>Will there be an on-site orientation about health and safety issues?</b>	
<b>MEDICAL SERVICES: Are medical services available at program site? What provisions can be made for emergency health situations?</b>	
<b>HEALTH &amp; SAFETY RISKS: What notable health or safety risks (e.g., infectious diseases, political instability, volcanoes, etc.) exist at the program location?</b>	
<b>What medications or immunizations are required? What would they cost participants?</b>	
<b>GROUP EMERGENCY PLANNING</b>	
<b>In the event of an emergency, whom should the Study Abroad Office contact abroad? If not already listed, please include this person's international cell number.</b>	
<b>Where are the group meeting locations in the event of a local emergency event and how would participants know to go there?</b>	
<b>What are the financial resources available to pay for evacuation?</b>	
<b>Who are the people arranging for evacuation if needed - local helpers, faculty, embassy, Illinois study abroad personnel, someone else?</b>	
<b>EMBASSY REGISTRATION: All participants should be registered with the State Department while abroad. See <a href="https://travelregistration.state.gov/ibrs/">https://travelregistration.state.gov/ibrs/</a></b>	
<b>Are participants registering themselves with local embassy or consulates? Or will the group be registered by group leaders?</b>	
<b>Location and address of nearest U.S. Consulate and Embassy.</b>	

\_\_\_\_\_  
Signature of Group Leader

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Faculty Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Study Abroad Office Director    Date

**PLEASE ATTACH THE FOLLOWING:**

- List of participants (including each student's full name and net id)
- Flight itinerary
- Program itinerary