

View xForm - International Travel Registration

International Travel Registration

Data Entry

Administrative Information

Form Creator:

Angela Patrick

Email: angela96@k-state.edu **Phone:**

Traveler Name:

No answer provided.

Contact Phone Number:

No answer provided.

Emergency Contact Name:

No answer provided.

Emergency Contact Phone Number:

No answer provided.

Department:

No answer provided.

Please provide your KSU Affiliation (check all that apply):

No answer provided.

Out of State Travel Request:

Reminder: An out-of-state travel request form must be submitted and approved by your Department prior to travel. Please consult with your department travel liaison to complete the out-of-state travel request form.

Travel Details

Purpose of Trip (Check all that apply):

No answer provided.

Itinerary Details:

Travel Start Date:

(The date you are leaving home)

No answer provided.

Travel End Date:

(The date you return home)

No answer provided.

Travel Destination:

(If any category does not apply to your destination please indicate "NA")

Country State: City: Address: Phone Number: Date:

Provide the modes of transportation to be used.

No answer provided.

Attach a copy of the travel itinerary as appropriate.

No answer provided.

Events, or Individuals, to be Visited:

Provide the name(s) and addresses of any: individual(s), companies, organizations, or conferences/events that will be attended/visited.

No answer provided.

Funding Source:

If any funding is provided by a foreign entity for this trip, to include paying for airfare, hotel accommodations, conference fees, etc., please provide name and address of company or individual providing funds.

No answer provided.

K-State Equipment:

Please list any K-State equipment, electronics, or materials to be brought on trip.

No answer provided.

Travel Insurance:

K-State employees, students, dependents, and other individuals are covered by the OnCall Global Assistance and Insurance Program when traveling outside of the United States. Please see below for the On Call ID Card and Program Summary letter. Travelers may also purchase trip interruption and/or cancellation insurance for reimbursement due to a variety of covered losses.

Travel Insurance Links:

On Call ID Card and Program Summary

https://www.travelinsured.com/agency/?p=KSU

***Individual travelers or departments are financially responsible for costs that are not covered by the policy.

Travel Health Consultation:

Travel Health Consultation Completed?

No answer provided.

K-State strongly encourages all travelers to participate in a travel consult from Lafene Immunization Clinic or from their primary care physician prior to their departure. https://www.k-state.edu/lafene/services/travel/index.html

Elevated Risk Location:

The university generally disfavors employees or students participating in university-sponsored international travel to any locations categorized as Level 3 or Level 4 by the U.S. Department of State or classified as Warning Level 3 by the Center for Disease Control and Prevention. The supervisor — or in the case of student travel that is faculty led, the supervisor or faculty — must seek prior approval before registering and booking any travel, by completing the below sections.

Helpful Links to assess category of risk for location(s):

U.S. Department of State Travel Advisory: https://travel.state.gov

Centers for Disease Control and Prevention Travel Notices: http://www.cdc.gov

Is your destination located in an area of elevated risk (Please review the links above this question to determine if your destination is located in an area of elevated risk.)?

No answer provided.

Additional Supporting Information:

No answer provided.

Traveler Signature

Traveler Assurance:

I assure that the information herein provided within the International Travel Registration form is to the best of my knowledge complete and accurate.

Please click next and submit, in order to send to Traveler for signature.