

Exemption Request for Travel

For Travel to Countries under U.S. Department of State Travel Warning or Center for Disease Control Warning Level 3

Any university-sponsored program, group, or individual planning to travel to a location under U.S. Department of State Travel Advisory Level 3 or 4, or Center for Disease Control Warning Level 3 must complete this form & submit it to The Office for Global Engagement *no later than one month prior to departure*. Please submit all exemption requests to <u>veronica.caballero@uvu.edu.</u>

GROUP TRAVEL (travel that involves a UVU employee and at least one student)

Program/Group:				
Faculty/Staff Program	Director:			
Title:			UVID:	
Department & School	/College:			
Email:			Phone:	
International Host Pr	ogram (if appli	cable):		
City, Country:				
Dates:		to		# of Students:
Is this a credit-bearing experience?		Yes	No	
INDIVIDUAL TR	RAVEL			
Name:			UVID:	
Position:	Student *If Faculty/Sta *Title:	Faculty aff provide the f	Staff following:	
Department & School	l/College:			Major:
Email:			Phone:	
International Host Pr	ogram (if appli	cable):		
City & Country:				
Dates:		to		
Is this a credit-bearing experience?		Yes	No	
Travel Purpose (i.e. st	tudy abroad, in	ternships, confe	erence, research):	
Internship Coordinat	or (if applicabl	e):		
Academic Advisor (if	applicable):			
NOTE: All students, fo	aculty and staff t	raveling abroad o	n university husiness, m	ust register international travel with the

Office for Global Engagement

UVU Global Engagement Office 12/12/18

Please explain the following:	
The need to travel to the desired country:	
The many and activities to be annihilated.	
The proposed activities to be conducted:	
How the proposed travel will be funded:	
The factors which mitigate the risks involved in the travel:	
Approval Signature	Date
Chief International Officer, Global Engagement	
Approval Signature	Date
Senior Vice President, Academic Affairs	UVU Global Engagement Office 12/12/18