## Request to Travel to High Risk Destination - Student

**Instructions:** Please fill out this form with as much detail as possible and return it to safety-abroad@uiowa.edu. This form will be used by the University of Iowa to assess whether your travel will be approved to go forward. Please direct all questions to safety-abroad@uiowa.edu. There may be follow-up questions regarding information you provide on this form. Please be aware that there is no guarantee that your travel proposal will be approved.

Name:		UI University ID:		
Date:	UI Email:			
Destination Under Review:				
Faculty Advisor(s):				
Dates of Travel:		Undergrad:	Grad:	
Description of travel plans, program or research project:				
What academic or other university goals a	are you meeting by c	completing this internation	nal travel?	
<ol><li>If your proposal is not approved in this loc done here in the United States, if not abroad?</li></ol>			our goals? Could it be	

faculty/staf	describe on-location supports (i.e. a university or organization ff accompaniment, housing and ground transportation, etc.). Ir n, if available. If you are traveling with a group consult your gro	nclude names, addresses and contact
Your answe	swering Question 4, you are required to read the following re er should reflect comprehension of information contained in e, these are the main risk assessment tools that the Universit	the reports. While this list is not
Ce Ov Op desti 4. Please o	.S. Department of State Travel Advisory: https://travel.state.genters for Disease Control and Prevention Travel Notices: https://erseas Security Advisory Council Crime and Safety Reports: hptional: If you would like to review UI private security partner tination you may contact safety-abroad@uiowa.edu for assist describe the risks referenced in the above documents and indergency preparedness plans, safety procedures, and locations	o://www.cdc.gov/ https://www.osac.gov r analysis for your ance. icate how you would mitigate those risks
Student S	Signature:	Date: