



Travel Restriction Exception Request and Approval Form:
EHRA Non-Faculty and SHRA Staff

This section to be completed by **the traveler**

Name: _____

Title: _____

Department: _____

Supervisor: _____

For proposed travel

Specific Dates: ____/____/____ through ____/____/____

Specific Destination(s) – city and country:

Description of proposed itinerary detailing the travel route:

Purpose of proposed activity and explanation as to why the activity cannot be fulfilled remotely via video conference or through other electronic means:

Detailed explanation of how the trip advances the University's educational or research mission; reference supporting documentation when available (i.e. external funded research):

NOTE: Incomplete forms will not be considered

A description of travel risks and how you propose to mitigate those risks during the trip and upon return to campus:

Please address factors such as [overall COVID-19 cases and deaths](#) in the destination country, [cases and deaths per 100K population](#) of the destination country, [vaccination rates](#) at the destination, and [COVID-19 Suppression Risk Level](#). Other factors that may help strengthen a case for approval include vaccination against COVID-19 and support in the destination country, such as through a local host or program administrator or family present in the destination country.

Traveler Signature: _____

This section to be completed by **the traveler's dean or other appropriate senior administrator**

Name: _____

School / Unit: _____

I have reviewed Carolina's [guidance on international travel](#) and have determined that the articulated benefits to the University of this request outweigh the risks associated with the travel.

Administrator Signature: _____