Undergraduate Student International Travel Approval Request Form

<table>
<thead>
<tr>
<th>This section to be completed by the student</th>
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<tbody>
<tr>
<td>Student Name: ______________________________________________________</td>
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<tr>
<td>PID: _____________________ Major: ____________________________________</td>
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<tr>
<td>Graduation Date: <strong><strong>/</strong></strong>/________</td>
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For proposed travel

| Specific Dates: ____/___/_______ through ____/___/_______ |
| Specific Destination: ________________________, ________________________ |
| (city) (country) |

Description of proposed itinerary detailing the travel route:

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

☐ I certify that I will be at least 18 years of age on the date of departure.

☐ I certify that I plan to remain at a fixed location.

Student Signature: ___________________________________________ Date: _______________
This section to be completed by the student’s advisor

Advisor Name: ___________________________________________________________

Essential academic justification for the proposed travel and an explanation as to why the work cannot be fulfilled remotely via video conference or through other electronic means, and why the work cannot be completed during a future term or semester:

I am aware that my advisee is requesting an approval to travel internationally, and I certify that the proposed travel fulfills a distinguishing academic or professional credential or qualification, such as advanced language study, thesis research requiring access to an archive only available in another country, or other academic purpose essential to an advanced multi-year academic program.

Advisor Signature: __________________________ Date: ________________

This section to be completed by the chair of the student’s department

Chair Name: __________________________ Department: ___________________________

I ratify the academic endorsement of the faculty advisor above and support this request for an undergraduate student travel restriction exception.

Chair Signature: __________________________ Date: ________________

This section to be completed by the dean of the student’s college/school

Dean Name: __________________________ College or School: ___________________________

I have reviewed this request and certify that the benefits to the student’s academic career outweigh the risks to UNC of the proposed travel.

Dean Signature: __________________________ Date: ________________