



Faculty and Postdoc Travel Restriction Exception: Request and Approval Form

This section to be completed by the traveler
Name: _____
Title: _____
Department: _____

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 dean of the traveler's college/school (or designee)**

Name: _____

College or School: _____

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.

Dean Signature: _____

NOTE: Incomplete forms will not be considered