



International Safety & Security

ILLINOIS INTERNATIONAL

HIGH RISK DESTINATION PLANNING FORM

RETURN FORM: At least one month prior to your departure date to the Illinois International Programs Office (IIP), 507 E. Green Street, Suite 401, Champaign, IL 61820.

QUESTIONS: If you have questions about this form or want to provide additional information about the proposed international activity, please contact Andrew Collum at aacollum@illinois.edu.

CHANGES/CANCELLATIONS: International Safety & Security must receive written notification if this program is canceled or if any faculty are going to be added or withdrawn from the group. Notice must be received prior to the group's departure date. Failure to do so could result in fees being charged to the Sponsoring College, Department or Unit.

PROGRAM SPONSORSHIP	
<i>Sponsoring College, Department or Unit</i>	
<i>Program name</i>	
<i>Program Dates</i>	
<i>Country/Countries</i>	
<i>City/Cities</i>	
<i>General description of the travel including the overall program goals</i>	
<i>List the best phone number that can be used to reach the you during the trip</i>	
<i>What other ways can we contact you in case of emergency during the trip?</i>	
<i>Host Institution Abroad with contact information</i> <i>Host Contact Person(s) with contact information</i>	
<i>UIUC staff or faculty on campus with contact information (who can be contacted on campus)?</i>	

<p><i>If this program or tour is co-sponsored with another institution(s), provide name(s) and contact(s) for institution(s)</i></p>	
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OTHER PARTICIPANTS

<p><i>Name of other participating faculty and staff? Contact information to include email and phone</i></p>	
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PROGRAM DETAILS & FACILITIES

<p>ACCOMMODATIONS: <i>Provide addresses and contact information for each location</i></p>	
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<p>LOCAL TRANSPORTATION: <i>How will travelers commute within the destination country?</i></p>	
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<p><i>What travel agency is being used for flights?</i></p>	
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<p>FLIGHT ITINERARY ATTACHED?</p>	
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HEALTH & SAFETY

INTERNATIONAL INSURANCE: Note that all participating faculty/staff and students traveling to high risk destinations **must** purchase the University-approved International Insurance for emergency medical, evacuation, and repatriation insurance.

-Faculty/Staff: All faculty/staff must enroll at: <http://www.safetyabroad.illinois.edu/insurance/register/> and will be billed to the account specified during that enrollment process. University departments normally pay this cost via CFOAP.

Program Length	International Insurance Cost
1-16 days	\$75.00
17-45 days	\$90.00
46-75 days	\$140.00
76-195 days	\$200.00
196-315 days	\$365.00
316-365 days	\$420.00

All participants must also register themselves with the State Department while abroad through the Smart Traveler Enrollment Program (STEP): <https://step.state.gov/step/>

Review the Travel Advice at <https://travel.state.gov/content/travel/en/international-travel/International-Travel-Country-Information-Pages.html>

<p>RISK INDICATORS: <i>Why is the country identified as high risk?</i></p>	
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<p>HEALTH & SAFETY RISKS: <i>How will indentified risks be mitigated?</i></p>	
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<p>MEDICAL SERVICES: <i>Are medical services available at program site? What provisions can be made for emergency health situations?</i></p>	
<p>EMERGENCY PLANNING</p>	
<p><i>In the event of an emergency, whom should the Study Abroad Office contact at the destination?</i></p>	
<p><i>Who are the people arranging for evacuation if needed - local helpers, faculty, embassy, Illinois study abroad personnel, someone else?</i></p>	
<p>EMBASSY REGISTRATION: <i>All participants should be registered with the State Department while abroad. See https://step.state.gov</i></p>	
<p><i>Location, address, and contact information of nearest U.S. Consulate and Embassy.</i> https://www.usembassy.gov/</p>	

Signature of Traveler

Date

Signature of Sponsoring Department Chair

Date

PLEASE ATTACH THE FOLLOWING:

- Flight itinerary.
- Program itinerary.
- Other information related to safety and security during travel.