

International Safety & Security

ILLINOIS INTERNATIONAL

INTERNATIONAL STUDY TOUR REPORTING FORM FOR HEALTH AND SAFETY

We have a responsibility to develop international learning experiences that are academically sound and provide safeguards for student safety and health. International Safety and Security (ISS), in collaboration with program sponsors at the University of Illinois, is responsible for evaluating the health and safety risks of prospective international programs.

RETURN FORM: At least <u>one month prior</u> to your study tour's departure date to Illinois International's International Safety and Security team located at 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 International Safety & Security at safetyabroad@illinois.edu or the study abroad administrators in your college.

CHANGES/CANCELLATIONS: International Safety & Security must receive written notification if this program is canceled or if any faculty, program assistants, or students are going to be added or withdrawn from the group.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 Students, Sponsoring College, Department or Unit.

PROGRAM SPONSORSHIP		
Sponsoring College, Department or Unit		
Program name as it appears in TDS if applicable		
Dates of program		
Country/Countries		
City/Cities		
General description of the study abroad trip including the overall program goals		
List the best phone number to reach the group during the trip and the name of the person carrying the phone.		
What means of communication in case of emergency during the trip?		

Head Chaperone name and title	
Department	
Email	
Cell phone	
Other chaperones' names, titles and	
contact information	
Name, email and phone of person filling out this form?	
Host Institution Abroad with contact information	
Host Contact Person(s) with contact information	
Local UIUC staff or faculty with contact information during the trip	
If this program or tour is co-sponsored with another institution(s), provide name(s) and contact(s) for institution(s)	
CURRICULUM & PROGRAM DESIGN	
Will this program earn academic credit?	
If so, in what term will the student register?	
Number of credits	
Course number	
PARTICIPANTS	
Who is registering your group online and managing	
your students and staff in TDS?	
IAGE or another office?	
Number of undergraduate students	
Number of graduate students	
Number of accompanying faculty/staff	

SUPERVISION: Describe the arrangements that have been made for responsible supervision of participants.	
PROGRAM DETAILS & FACILITIES	
ACCOMMODATIONS: Provide addresses and contact information for each location	
MEALS : How and where will meals be provided?	
INSTRUCTION: How and where will instruction take place?	
LOCAL TRANSPORTATION: How will students commute within the destination country?	
Who locally will help arrange any field study or service learning experiences if included? Provide contact information.	
INTERNATIONAL TRAVEL: How will participants reach the program destination and return back to the US?	
What travel agency is being used for flights?	
Is the entire group traveling together to and from the host countries?	
What travel agency is being used for hotels and/or local transportation? List name and contact info.	
FLIGHT ITINERARY ATTACHED?	
PROGRAM ITINERARY ATTACHED?	
HEALTH & SAFETY	

INTERNATIONAL INSURANCE: Note that all participating faculty/staff and students traveling abroad <u>must</u> be covered by emergency medical, evacuation, and repatriation insurance.

- **-Faculty/Staff:** All faculty/staff must enroll online at: http://safetyabroad.illinois.edu/insurance/ and will be billed to the account specified during that enrollment process. (Faculty/staff do not get billed the admin fee.)
- -Students: Enrollment will be processed by IAGE and charges will be billed to student accounts.

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	\$365.0	0
316-365 days	\$420.0	0
		ne State Department while abroad through the Smart
		e.gov/content/passports/en/go/step.html
	nen will participants be	
reviewing the Health	and Safety PowerPoint?	
,,		
	ovide on-site orientation to	
participants about ne	alth and safety issues?	
MEDICAL SERVICE	EC. A	
	ES: Are medical services site? What provisions can be	
made for emergency l	•	
	Y RISKS: What notable	
	(e.g., infectious diseases,	
1 -	olcanoes, etc.) exist at the	
program location?		
	immunizations are required?	
What would they cost	participants?	
GROUP EMERGEN		
=	ergency, whom should the	
Study Abroad Office of	contact abroad?	
Where are the group	meeting locations in the event	
of a local emergency		
participants know to		
Who are the people a	rranging for evacuation if	
needed - local helper.	s, faculty, embassy, Illinois	
study abroad personn	sel, someone else?	
	* *	l be registered with the State Department while abroad.
See https://step.state.gov/step/		
4		
	stering themselves with local s? Or will the group be	
registered by faculty	9 1	
gant in a y juicinity		
Location and address	of nearest U.S. Consulate and	
	•	

Embassy.	
Signature of Faculty Director	Date
Signature of Sponsoring Department Chair	Date
Signature of Sponsoring College Dean	Date
Signature of Study Abroad Office Director Or Coordinator for the Program	Date

PLEASE ATTACH THE FOLLOWING:

- List of participants (students/faculty/staff) with respective NetID's and UIN's.
- Flight itinerary.Program itinerary.