EXCEPTION TO TRAVEL PETITION

In compliance with the Policy on Seattle University-Related Travel to High Risk International Locations, a petition to the SU International Risk Assessment Committee must be submitted for review to the Director of Education Abroad (Gina Lopardo, glopardo@seattleu.edu) by the following deadlines:

- **July 15** (Travel September – November)
- **October 15** (Travel December – February)
- **January 15** (Travel March – May)
- **April 15** (Travel June-August)

**Name:** ______________________________________________________________________________________________

**Email:** __________________________________________________________

**Program Location:**

City ________________________________________ Country __________________________

**Program Name:** ______________________________________________________________________________

**Program Provider/Affiliate Organization:** ___________________________________________________________________

I read and understand the most recent U.S. Department of State Travel Advisory for this location. □ Yes □ No

**Provide the date of the Travel Advisory:** _____________________________________________________________

**Dates of Proposed Travel:** __________________________________________________________ through __________

This is a:

- SU Sponsored Education Abroad Program
- SU Approved Education Abroad Program
- Non-SU Education Abroad Program
- SU affiliated service, club, organization or immersion
- Independent study, internship or research

I am a:

- Faculty or staff who wishes to take students, alumni and/or guests to a location currently under a Travel Advisory or Restriction for study, research, internship or service.
- Student who wishes to study, research, intern or serve independently in a location currently under a Travel Advisory or Restriction.
- Student On-Campus Club Representative that wishes to travel to a location currently under Travel Advisory or Restriction.

For Students ONLY:

**Major:** __________________________ Credit Hrs. Completed: ________ Current GPA: __________

For Faculty or Staff ONLY:

**Organization/Department:** ______________________________________________________________________

**Total Number of Expected Participants:** _____ Students _____ Faculty _____ Staff _____Alumni _____ Guests

Attach this form to your petition.

Please see the reverse side for items to include in your petition.
• Overview of the program and rationale for choosing this destination
• Evidence that petitioner is aware of the current risk present in the host location
• Qualifications of host location partners and description of their history of participant safety
• Qualifications of the leader/s (or independent student) including familiarity with the host location, its culture, norms, etc.
• Host location’s language
  o What level of fluency does the petitioner/s have with the host language?
  Or
  o How will the language barrier be handled if the petitioner/s are not fluent in the host language?
• Description of issues related to health, safety and security of participants including proximity and access to emergency and health support
• Description of logistical information including communication methods, established rules, housing security, meals, excursions, classrooms and transportation
• Itinerary/daily routine for short-term group programs (less than one quarter)
• Description of pre-departure and on-site orientation
• Letters from host site partners which address the current environment in the host location
• Map indicating the geographic location/s of the program
• Any other relevant supporting documentation

REQUIRED SIGNATURES:

__________________________________________________________  ___________________________
Petitioner         Date

__________________________________________________________  ___________________________
Dean (academic programs), Supervisor or Director (non-academic)  Date

Petition Process
The committee will review petitions submitted by the deadline and make a recommendation to the Provost or designee. Petitioners will be notified of the decision within thirty (30) of the deadline.

If the petition is approved, participants are required to complete an additional Waiver of Liability related to the Travel Advisory, which is provided by the Education Abroad Office prior to departure.

To be completed by the International Risk Assessment Committee Chair:

Date of Review: _________________________________       Date of Notification to Petitioner: ________________________

☐ Recommended for Approval       ☐ Not recommended for Approval

Comments: