Learning Abroad Travel Policy Acknowledgement
for University Sponsored and/or Organized Travel

This form is required for UH students who choose to participate in a University Sponsored and/or Organized Learning Abroad program that takes place in a location with a Level 3 (“Reconsider Travel”) Travel Advisory issued by the U.S. Department of State. Travel to Level 3 destinations is not permitted without authorization per the Learning Abroad Policy for Student Travel.

Student acknowledges the following:

1. I have carefully identified, reviewed and considered the risks of travel to my destination. I am familiar with the basic international travel safety precautions for the area in which I am traveling to. I have read and understand the following information:
   a. The U.S. Department of State Travel Advisory for the program destination: https://travel.state.gov/content/passports/en/alertswarnings.html

2. If I am a U.S. citizen, I have enrolled my travel with the U.S. Department of State’s Smart Traveler Enrollment Program (STEP): https://step.state.gov/step/. If I am not a U.S. citizen, I will register with my home country’s Embassy or Consulate.

3. I understand I am not required or encouraged to travel to this destination. I am voluntarily traveling to the destination(s) mentioned below and assume all risk associated with this travel.

4. I have self-enrolled in CISI international insurance for University of Houston Learning Abroad Programs and confirm it will be in force and effect for the entire duration of my travel: http://www.uh.edu/learningabroad/health/cisi/.

5. I understand the University reserves the right to cancel the program and/or require students to leave their international program location due to health, safety and/or other concerns.

6. I understand failure to comply with this policy may result in the Dean of Students initiating disciplinary proceedings.

7. I understand I may not travel to other regions/countries with a Level 4 advisory during the program.

BY SIGNING THIS FORM, I ACKNOWLEDGE THE EXISTENCE OF THE TRAVEL ADVISORY IN MY CHOSEN PROGRAM LOCATION(S), THE RISKS INVOLVED AND MY DECISION TO CONTINUE WITH THE PROGRAM DESPITE THAT ADVISORY.

Program Destination City/Town and Country/Countries: __________________________

Departure Date: ___________________________ Return Date: __________________________

PeopleSoft ID: ___________________ Signature: ___________________ Date: __________

For students under 18 years of age:

Parent Name: ___________________ Signature: ___________________ Date: __________

Updated August 2019