

WSU-Sponsored International Travel Request Form

* Indicates a required field

SECTION A: TRAVELER INFORMATION

Last Name *	First Name *	Middle Name	
myWSU ID *	Title (if applicable)	Dept/Unit (if applicable)	Supervisor (if applicable)

SECTION B: GENERAL TRAVEL INFORMATION

Purpose of Trip: *	<input type="checkbox"/> Conference or Presentation	<input type="checkbox"/> Research
	<input type="checkbox"/> Student Recruitment	<input type="checkbox"/> Vacation/Personal Reasons
	<input type="checkbox"/> Study Abroad	
	<input type="checkbox"/> Other: _____	
Dates of Travel: *		
List all countries you plan to visit. *	Countries you will visit:	
<p>Specific Travel Plans <i>(Please describe your travel situation in detail. List all airlines, lodging accommodations, conference/venue information, meetings, etc. If you will be traveling with students or other staff, please also state who and describe their involvement.)</i> *</p>		

SECTION C: FUNDING INFORMATION

<p>1. Please provide the source of funding for this travel/collaboration (check all that apply): *</p>	<input type="checkbox"/> Grant <input type="checkbox"/> Industry <input type="checkbox"/> WSU Department <input type="checkbox"/> Financial Aid/Scholarships <input type="checkbox"/> Personal Funds <input type="checkbox"/> Other
<p><i>please provide additional information (e.g., fund #, grant #, etc. for question 1):</i></p>	

<p>2. Is any of this travel and/or collaboration sponsored by any of the following (check all that apply): *</p> <p>a. A foreign government</p> <p>b. A foreign academic institution</p> <p>c. Any other foreign entity</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>if the answer to questions 2(a)-(c) is yes, please explain:</i></p>	
<p>3. Are you receiving any compensation for this trip and/or collaboration from any of the following (check all that apply): *</p> <p>a. A foreign government</p> <p>b. A foreign academic institution</p> <p>c. Any other foreign entity</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>if the answer to questions 3(a)-(c) is yes, please explain:</i></p>	
<p>4. Are you receiving any fringe benefits during or as a result of this travel and/or collaboration (e.g., honoraria, gifts, meals, etc.) from any entity, foreign or domestic? *</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>if the answer to question 4 is yes, please explain:</i></p>	
<p>5. Please provide a list of all grant funding for the past 5 years and any anticipated funding that you are aware of (e.g., type, agency, dates, etc.). If you have not had grant funding, type "Not applicable." *</p>	
<p>6. Will any portion of your travel be paid with federal funds (e.g. grants, contracts, etc.)? If yes, your travel must comply with the Fly America Act (49 USC 40118). *</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

SECTION D: WSU ITEMS, EQUIPMENT, SERVICES, OR CONTROLLED INFORMATION

1. Please provide a list of any WSU data/information/materials/equipment/etc. you plan to take on your trip: *

2. Please provide a list of any electronic devices, either university owned or personal, you plan to take on your trip: *

3. Please provide a list of any needed access to university files, folders, servers, network, etc. you would like during your trip: *

4. Do you anticipate or expect accessing or working on any proprietary, confidential, or export controlled information or technical data, such as work that is currently operating under a TCP or deemed proprietary by NDA or contract, while abroad (including within e-mail)? If yes, please explain: *

SECTION E: SAFETY AND RISK ASSESSMENT

1. List all [Department of State Travel Advisories](#) for the places you will be visiting. *

City (or state/area) AND Country of Travel	Advisory Level
Examples: Paris, France Kuala Lumpur, Malaysia Colima State, Mexico	Level 2: Exercise increased caution Level 1: Exercise normal precautions Level 4: Do not travel

2. Have you read WSU's webpage on [International Travel Tips](#)? * Yes No

3. If you have an emergency during your trip and WSU needs to contact a friend or family member, who should we contact? *			
Name of Emergency Contact	Phone Number for Emergencies	Email Address	Relationship
Example: Tommy Tutone	(316) 867-5309	jennyjenny@wichita.edu	Spouse
4. Will you have access to a cell phone when traveling abroad? * If yes, what is the cell phone number where you can be reached for emergencies?			<input type="checkbox"/> Yes <input type="checkbox"/> No Cell Phone Number: <input type="text"/> <small>Country Code + City Code + Phone Number</small>
5. Please list your emergency contact information below in the event that WSU needs to contact you during your trip. *			
City, State/Province, Country	Name of Hotel	Telephone Number <small>(Country Code + City Code + Telephone Number)</small>	Dates of Stay
Example: Hyderabad, Telangana, India Colombo, Sri Lanka	Park Hyatt Hyderabad Sheraton Colombo Hotel	+ 91 40 49491234 + 94 11 7 678000	3/17/2020 to 3/24/2020 3/25/2020 to 3/29/2020

6. University-Sanctioned Student Travel: Per WSU Policy 8.13 , a University-Sanctioned Student Travel Registration Form must be completed by the WSU department approving any kind of university-sanctioned student travel – including faculty-led study abroad trips. Will this trip involve student travel of any kind? *	<input type="checkbox"/> Yes and I will complete the required registration form <input type="checkbox"/> No
--	--

I certify that all information contained in this document and any attached documentation is complete and correct. I understand that the submission of false information is grounds for the denial of my travel request and may subject me to disciplinary action.

Type your name to sign electronically	Date

**TO SUBMIT FOR REVIEW, PLEASE E-MAIL
THIS COMPLETED FORM AS AN ATTACHMENT TO
travelcompliance@wichita.edu**