

Today's Date _____

University of Florida International Travel Check List

Please complete this form and send it to the person in your department responsible for travel before you travel abroad on behalf of the University of Florida (defined at <http://www.ufic.ufl.edu/haiti/index.htm>). Please do so for each trip even if it involves repeated visits to the same country.

Traveling to (list countries): _____

Travel dates: _____ (mm/dd/yy) to _____ (mm/dd/yy)

Travel dates: _____ (mm/dd/yy) to _____ (mm/dd/yy)

Travel dates: _____ (mm/dd/yy) to _____ (mm/dd/yy)

_____ (initials) I have consulted with my clinician or a travel clinic about my international travel and have received necessary vaccines and travel medication

_____ (initials) As required I have registered my international travel with the International Center (<http://www.ufic.ufl.edu/travelregistration.html>) and have received my MEDEX card

_____ (initials or n/a) If I am traveling to Haiti I have additionally read the UF policy at <http://www.ufic.ufl.edu/haiti/index.htm>, and as required I completed, signed, and submitted a UF travel waiver form to Dean David Sammons.

_____ (initials or n/a) If I am traveling to an embargoed country, I have additionally read the UF policy at http://ufic.ufl.edu/ExportControls_AEC.html, and as required I have contacted Dean David Sammons.

_____ (initials or n/a) If I am traveling to Haiti and I am a US citizen I have registered with the US Embassy in Haiti at http://haiti.usembassy.gov/information_for_travelers/travel-registration.html

Name: _____
(exactly as it appears on your government-issued passport)

UFID _____ Passport #: _____

Date of passport issue: _____ (mm/dd/yy)

Date of passport expiration: _____ (mm/dd/yy)

Country of issue: _____ Country of residence: _____

Signature: _____ Date: _____ (mm/dd/yy)