

Shepherd University Study Abroad Office

AUTHORIZED STUDENT TRAVEL FORM

Traveler's Name: _____

Dates of Travel: _____

Destination(s): _____

Host College/University: _____

Attach itinerary (include modes of transportation to, within and from destination(s), hotels/housing, and schedule). In connection with my trip to the above-referenced destination(s):

1. I have carefully identified, reviewed and considered the risks of travel to my destination(s), including by reading the most recent relevant U.S. State Department (“DOS”) Travel Warning(s), Consular Information Sheet(s) and public announcements available through <http://travel.state.gov/>.
2. I acknowledge that I am voluntarily participating in the travel described above. I also acknowledge that my participation in this travel may expose me to significant risks, including but not limited to terrorism, crime, war, serious bodily injury or death, property damage, and other risks that may not be foreseeable. I understand that Shepherd University is not responsible for my safety and I assume full responsibility for all risks associated with my travel.
3. I understand that the success of my petition to study abroad by the Study Abroad Board Sub-Committee does not in any way guarantee my health or safety while participating in this study abroad program nor decrease the risk of travel to the destination(s) described above.
4. I know that I am not required or encouraged to travel to this destination(s) and, in fact, Shepherd University has urged me to consider other destination(s).
5. I understand that Shepherd University will certify this program for funding and/or financial aid in connection with my travel and that I will be eligible to receive academic credit at Shepherd for any coursework taken while on this program if I comply with the policies and procedures outlined by the Study Abroad Board Sub-Committee in granting my petition. I understand that failure to comply with the policies and procedures outlined by the Study Abroad Board Sub-Committee in granting my petition will result in the revocation of my financial aid and credit approval.
6. I know conditions in my destination(s) may change rapidly and I hereby pledge to stay informed of current events on a frequent, at least daily, basis by obtaining updated security and health information from, and registering with, the nearest U.S. Embassy or Consulate General (see Travel Warning for contacts), and from the DOS website. I also pledge to enroll in the warden system with the U.S. Consulate(s) nearest my destination(s). If I am not a U.S. citizen, I will register with my home country's Embassy or Consulate and get updated information from the U.S. and my home country's Embassies or Consulates, and the DOS website.

