

See Page 3 for approver names and links. Email this form as an attachment to appropriate approver.

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| Traveler Name: | |
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| UCSF Email: | |
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| Dept., Division, or Institution: | |
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PART I -- TRAVELER DETAILS, REQUIREMENTS & RISK

REQUIRED

Complete a separate row for each leg of travel or separate travel activity

| Travel dates | Destination – City, Country | Activity – include activity, institution or conference name & link |
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| 1. I attest that I am up-to-date on vaccines or that I have a formal exemption from UCSF. | Yes | No |
| 2. I attest that I will register for UCSF international travel insurance (see resources on page 2). | Yes | No |
| 3. I attest that I will follow current UCSF mandates for vaccinated or exempted UCSF employees during UCSF-sponsored activities while traveling (like masking except while eating, hand-washing, distancing, Indoor restrictions, etc.). | Yes | No |
| 4. I attest that I will follow any additional required local or county requirements. | Yes | No |
| 5. I have reviewed the appropriate public health recommendations & risk levels for my destination: | Yes | No |
| a. CDC COVID-19 Travel Recommendations by Destination | | |
| b. U.S. Department of State Country-Specific Travel Advisories | | |
| c. U.S. Department of State COVID-19 Country-Specific Information | | |
| d. CDC Increased Risk for Severe Illness | | |
| 6. I understand that many travel insurance companies consider COVID-19 a foreseeable circumstance, which disqualifies travelers from receiving benefits under Trip Cancellations and Interruption Benefits. If I am required to leave or evacuate my destination country before my intended return date due to a resurgence of COVID-19 at my destination or for any other COVID-19 related reason, the travel insurer may not financially reimburse me for return travel costs. However, if I am ill with COVID or other conditions, most travel insurance companies will respond as country and other restrictions allow, and I will check with my travel insurer if I have questions. | | |
| 7. I will purchase fully refundable airfare if possible, to reduce my financial losses if the trip is cancelled or interrupted. | | |
| 8. I understand that if there are subsequent COVID-19 or new coronavirus variant outbreaks, the destination country may unexpectedly close borders, return to strict social distancing, and restrict travel, which could prevent return to the U.S. for an indefinite time. | | |
| 9. I understand I am financially responsible for any extraordinary charges (beyond those considered reimbursable by my travel insurance) due to new variant emergencies or COVID-19 outbreaks, including but not limited to costs for country entry requirements (e.g., isolation, quarantine, testing); quarantine or isolation costs if showing symptoms; re-entry requirements if I choose to travel outside of my destination country; or costs incurred to comply with host country regulation not herein or known beforehand. | | |

TRAVELER ATTESTATION

I have reviewed this page in detail and filled out all required portions. I attest that I understand and accept the risks noted above, as well as additional unstated travel risks, especially due to COVID. I will also review the resources on page 2. **This approved form must be attached to your reimbursement request through MyExpense.**

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|----------------|------------|-------|
| Traveler Name: | Signature: | Date: |
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APPROVAL AUTHORIZATION FOR TRAVEL REQUEST

In approving this form, I have assessed operational consequences if 3 or more travelers to the same event/site are delayed in return to work. *I'll return a copy to traveler & keep a copy in dept. files.*
Note: per standard procedure for the university, the listed approvers in Part III may not sign his/her own form but must be approved by the person to whom they report or his/her designee.

Approved

Not Approved

| | |
|----------------|-----------------|
| Approver Name: | Approver Title: |
|----------------|-----------------|

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|---------------------|----------------|
| Approver Signature: | Approval Date: |
|---------------------|----------------|

EMERGENCY AND INFORMATION RESOURCES

STRONGLY RECOMMENDED

Review the following resources before departure and keep these available during travel in case of emergency.

- [Country Embassies](#) – select the appropriate country.
Bring emergency numbers and location with you _____
- If you have additional travel risk or security questions regarding your travel or destination(s), please contact [Andrew Sinclair](#), Global Security Risk Analyst

INTERNATIONAL TRAVEL INSURANCE

REQUIRED

International Health Insurance – Check COVID policies.

- UC Travel Insurance: **free and required for UCSF-sponsored travel**. If travel is not booked through Connexus, you must [register before departure](#)
- [UC Personal Travel Insurance](#) or your choice of travel insurers: **recommend purchase for non-UCSF travel**

Bring emergency phone & policy numbers with you:

- UCSF Travel Emergency: 1-630-694-9804 (outside US, collect); 1-855-327-1420 (in US).
Policy Number: _____
- **OR** your personal insurance emergency numbers _____

ADDITIONAL LOCATION AND RISK FACTORS

STRONGLY RECOMMENDED

Is PPE Available at your destination? If not, carry an adequate supply.

[Describe any current flight, travel or border restrictions:](#)

Describe the Following In-Country Conditions and Public Health Requirements below using [U.S. DOS COVID-19 Country-Specific Information](#) – if sufficient information is not available, also check [covidcontrols.co](#) (select country by clicking on the map):

- Arrival Testing or COVID-19 Document Requirements:

- Arrival Quarantine Requirements:

- Other Public Health Requirements Including Masking, Testing, Distancing, and Curfew:

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Search online and personal contacts for ICU bed capacity at present where you plan to travel:

No concern regarding beds

Beds limited

Unable to Determine

RETURNING FROM TRAVEL

REQUIRED

[Check the US border requirements to return from travel.](#)

[If you are a Non-U.S. Citizen/Permanent Resident, understand the restrictions you face, and that they may change in the future.](#)

[Check and follow the testing and self-quarantine requirements upon return to San Francisco.](#)

PART III – APPROVER NAMES & LINKS

This form is not for use by students

Once you have completed the necessary fields above, email this form as an attachment to the appropriate approver, based on the information below. *This approved form must be attached to your reimbursement request through MyExpense.* Please take this form abroad so you have emergency phone numbers and links in case of emergency.

Note: per standard procedure for the university, the listed approvers below may not sign his/her own form but must be approved by the person to whom they report or his/her designee.

Approvers for Requests by Faculty, Research-Related Staff, and Administrative Staff (from departments or institutes), Post-Docs, Fellows, Residents, and Independent Contractors

Approval for university-sponsored international travel may only be provided by the appropriate Departmental Chair or Institutional Director or their designees. Research-project staff, including postdoctoral scholars, and independent contractors must have essential approval requests submitted by the UCSF principal investigator or chief administrator of the project. Research-project staff, including postdoctoral scholars, and independent contractors must have essential approval requests submitted by the UCSF principal investigator or chief administrator of the project.

SOM Department & Institute Chairs and Directors

<https://medschool.ucsf.edu/sites/medschool.ucsf.edu/files/inline-files/Departments%20ORUs%20and%20IDCs%20Chairs%20and%20Directors%20and%20Assistants%20by%20Unit%2002-14-22%20PJM.pdf>

SOP Department Chairs and Directors

<https://pharmacy.ucsf.edu/about/administration/department-chairs>

SON Department Chairs and Directors

<https://nursing.ucsf.edu/about/our-organization/departments>

SOD Department Chairs and Directors

<https://dentistry.ucsf.edu/about/academic-departments>

IGHS Funded Work

For Faculty: [George Rutherford](#)

For Staff: [Georgina Lopez](#)

Approvers for Requests Pertaining to Other Administrative Office Staff or Recruitments

Approval for university-sponsored international travel by other administrative office staff may only be provided by leadership based on the Offices where they are assigned or the approvers' designees:

Chancellor's Office

- Chancellor's Immediate Office designee: [Terri O'Brien](#)
- Office of University Development & Alumni Relations: [Erin Hickey](#)
- Office of Communications: [Won Ha](#)
- Office of Community & Government Relations: [Francesca Vega](#)
- Office of Diversity and Outreach: [Renee Navarro](#)
- Office of Legal Affairs: [Greta Schnetzler](#)
- Office of Science Policy & Strategy: [Keith Yamamoto](#)
- Office of Chief Ethics and Compliance: [Brian Smith](#)

Executive Vice Chancellor & Provost designee: [Clarice Estrada](#)

Finance & Administration designee: [Stephanie Mackler](#)

Director of Talent Acquisition for recruiting visits: [Steven Wiseman](#)

UCSF Health CEO designee: [Cynthia Chiarappa](#)

Vice chancellors, vice presidents and above, or their designees can also approve university-sponsored international travel for their teams/personal staff.