

**GRADUATE SCHOOL AND INTERNATIONAL EDUCATION  
OFFICE OF STUDY ABROAD AND INTERNATIONAL EXCHANGE**

PETITION FOR EXCEPTION TO OVERSEAS TRAVEL POLICY

{To be submitted to Office of Study Abroad and International Exchange at least one week prior to regularly scheduled monthly meetings of the International Education Advisory Council (IEAC);  
Must be approved prior to TA request or purchase of airfare.}

Name of Traveler\* or Group Leader:

Department:

Unit:

Dept. Head:

Dean:

Email:

Campus Address:

Campus Phone:

\*If a student, provide: ID#

Email:

**PROPOSED TRAVEL OUTSIDE OF THE U.S.:**

Destination of Travel (city/country)

Dates of Travel:

Purpose:

Primary contact in country

Name

Address

Phone

Email

On a separate attachment, please provide the rationale for making this trip in light of current U.S. State Department travel advisories. Include any knowledge of safety conditions in the local area that may help to minimize your risk. Attach any supporting documentation.

**TRAVEL ENDORSEMENTS**

Department Head: \_\_\_\_\_  
Print Signature Date

Dean: \_\_\_\_\_  
Print Signature Date

\_\_\_\_\_  
Signature of Person Making Request Date