

Part 1 – Traveller to complete

Traveller Details

Traveller Name:

I am a: Staff Member Student Other

Work Unit: Contact Phone:

Proposed Itinerary – if more space is required please provide as a separate attachment

Days in Country	Country of Travel	DFAT Risk rating(s) *	ISOS Risk Rating **	
			Travel	Medical

* [DFAT / Smartraveller destination guide](#)

** [International SOS location list and COVID trip planner](#)

*** [International SOS Risk Rating definitions](#)

Provide the purpose of your travel:

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Activities planned

Fieldwork

I have completed a Fieldwork Risk Assessment (if required by my workunit) YES

Approved by: Date:

Study Abroad/ Exchange Program

For Staff - a Group travel risk assessment has been undertaken. YES

Please contact the International office for details.

Approved by: Date:

Other Details:

Provide any other relevant details about the proposed activities:

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Risk Assessment Checklist - responses are required for all

<p>International SOS Travel Risk Ratings:</p>	<p>I have reviewed the latest International SOS information for my destinations (Member number 12AYCA091217)</p> <p>I will contact International SOS for a confidential individual briefing if I need to discuss any relevant health, security or other considerations. <i>E.g. pre-existing conditions, medications, potential impact of Covid-19, border restrictions, personal safety, crime, cyber safety etc.</i></p> <p>ISOS Case Number:</p>	<p>Yes</p>
<p>DFAT Travel Risk Ratings</p>	<p>I have reviewed the latest information from DFAT for my destinations</p> <p>If the DFAT advice is 'reconsider your need to travel' or do 'not travel' – I have contacted insurance@scu.edu.au in relation to travel insurance implication</p>	
<p>University Corporate Travel Insurance</p>	<p>I have read and understand the University Corporate Travel Insurance cover information, and if I consider it necessary, will arrange my own travel insurance cover.</p>	
<p>International SOS</p>	<p>I understand that I will need to contact International SOS if I need emergency medical or security assistance while travelling.</p> <p>I have installed the International SOS app on my phone.</p>	
<p>Fit to Travel</p>	<p>I confirm that I am 'fit to travel' and have taken into consideration any pre-existing medical conditions, medication requirements, impact of potential travel disruptions on physical and mental health.</p>	

Note: DFAT and International SOS information is subject to change and should continue to be monitored in the lead up to, and during travel

Traveller Declaration - responses are required for all

I have reviewed and understand the relevant Covid-19 requirements for my trip (border, entry, testing, quarantine, vaccination, documentation, etc.) and the COVID-19 situation in each destination (case numbers, community vaccination coverage, ability of local healthcare to manage COVID-19 or other medical situations etc.).

I confirm that the above information is correct to the best of my knowledge. I acknowledge that I am responsible for taking appropriate steps to manage risks associated with my trip.

Traveller name: **Date:**

Part 2 – Travel Approver to complete then Submit form
Approver Declaration

I have read the above risk assessment, and based on the information provided I approve the proposed travel

Approver signature: Date:

For more information on your destination, please contact travel@scu.edu.au

To check insurance coverage, please contact insurance@scu.edu.au

For assistance to complete this form or to obtain a Fieldwork Risk Assessment form, Student Group Travel Risk Assessment form, please contact: risk@scu.edu.au