

Virginia Polytechnic Institute and State University
GLOBAL EDUCATION PROGRAM LEADER PRE-DEPARTURE CHECKLIST

Program name _____ **Sponsoring unit** (college/department): _____

Program departure date: _____ **Program return date:** _____

Lead faculty member (with decision authority): _____

Campus address: _____ Campus phone: _____

Home/cell phone: _____ Email: _____

Individual authorized to cancel the program before departure: _____

Phone: _____ Email: _____

CHECKLIST:

The following checklist and supporting documentation must be received by the Virginia Tech Global Education Office at least one month prior to program departure. All questions may be directed to GEO via phone (540) 231-5888 or email vtabroad@vt.edu.

Program Information:

- ___ Planned location and contact phone numbers for each day of program
- ___ Program leader's overseas cell phone number
- ___ For travel between cities, method of travel and contact information (e.g., travel agent, airline, bus company, if applicable)
- ___ Complete flight itinerary (including dates and flight numbers) during program. If students arrange their own travel to destination country, provide each student's flight itinerary or request that it be collected in StudioAbroad
- ___ Participant list including name, email address, student ID number, home address, name of person to be contacted in emergency, and phone number of emergency contact person (reflective of the final roster found in the StudioAbroad database at www.educationabroad.vt.edu)

Student Forms: (Collected and audited by Global Education via StudioAbroad)

- ___ Emergency Contact and Authorization to Release Information form from each participant
- ___ Signed University-approved Program Liability Agreement from each participant
- ___ Signed Refund/Cancellation and Financial Agreement policy from each participant with wording that costs could be increased due to unforeseen changes in exchange rates or other events (customizable)
- ___ Signed Undergraduate Honor and Student Conduct Records Release Waiver from each undergraduate participant
- ___ Signed Voluntary Health Disclosure form
- ___ Travel Warning Informed Consent form, if relevant to program travel destination/s
- ___ Legible, color copy of Passport ID page for each participant and US visa page in the case of program participants who are non-US citizens

Risk Management:

___ Program leader has attended both a GEO program management and pre-departure training within the past three years

___ If destination country is under a [U.S. Department of State Travel Alert or Warning](#), [Center for Disease Control and Prevention Travel Notice](#), and/or [World Health Organization](#) warning, approval has been secured via petition. Petitioner should contact the Global Education Office.

___ All program participants have been enrolled in the university's mandatory travel medical insurance plan via the VT GEO Scholar site (reflective of the final roster found in the StudioAbroad)

___ All participants have been enrolled in the U.S. Department of State's [Smart Traveler Enrollment Program](#) prior to departure (reflective of the final roster found in the StudioAbroad)

APPROVALS:

Faculty Member /Program Leader

Name: _____

Signature: _____

Date: _____

(Signature indicates that all information required in checklist has been provided, either to the department or to VT GEO)

Department Head/Chair/Director

Name: _____

Signature: _____

Dean/Associate Dean/Vice President/Vice Provost

Name: _____

Signature: _____

(Signatures indicate that program, as detailed above, has met with both departmental and college approval)