May 5, 2014

University of Florida International Travel Check List

Please complete this form and send it to the person in your department responsible for travel before you travel abroad on behalf of the University of Florida. Please do so for each trip even if it involves repeated visits to the same country.

Traveling to (list countries): ________________________________________________

Travel dates: ____________________ (mm/dd/yy) to ________________ (mm/dd/yy)

Travel dates: ____________________ (mm/dd/yy) to ________________ (mm/dd/yy)

Travel dates: ____________________ (mm/dd/yy) to ________________ (mm/dd/yy)

________ (initials) I have consulted with my clinician or a travel clinic about my international travel and have received necessary vaccines and travel medication

________ (initials) As required I have registered my international travel with the International Center (http://www.ufic.ufl.edu/travelregistration.html) and have received my MEDEX card (Effective August 1st, 2012, MEDEX will be replaced by the TeamAssist Emergency Assistance Program).

________ (initials or n/a) If I am traveling to an embargoed country, I have additionally read the UF policy at http://www.ufic.ufl.edu/TravelEmbargoed.html, and as required I have contacted Dean David Sammons.

Name: ____________________________________________
(exactly as it appears on your government-issued passport)

UFID ____________ Passport #: _________________

Date of passport issue: ___________ (mm/dd/yy)

Date of passport expiration: ___________ (mm/dd/yy)

Country of issue: ________________  Country of residence: ________________

Signature: ________________________________ Date: ____________________ (mm/dd/yy)