



International Travel Supplemental Information – Concur Travel Request

RMEHS requests the following information as a supplement to the Travel Request. The information provided herein will be used to transmit to our insurer for contingent emergency use. **Please attach this form to your Travel Request in Concur when you submit for approval.**

Destination(s) of Travel: _____
(i.e. city, province, region, state, and country)

Travel Date(s): From _____ To _____ Number of personal travel days (N/A if none): _____

Traveler Type: ☐ Employee ☐ Student ☐ Other Participants List dates of personal travel (if applicable): _____

Please provide contact information for employee(s) traveling:

Employee Name	Phone Number	Email Address	Emergency Contact (i.e. name, relationship, phone number)

Please provide contact information for student(s) traveling:

Student Name	Phone Number	Email Address	Emergency Contact (i.e. name, relationship, phone number)	Is the student a minor? (Y/N)*

**If yes, refer to the [Youth Protection Program \(YPP\)](#) for requirements.*

Please provide contact information for any other participant(s) traveling (e.g. spouse, dependent, parent, etc.):

Participant Name	Phone Number	Email Address	Emergency Contact (i.e. name, relationship, phone number)

All travelers must complete the following. Please also include your travel itinerary with your Travel Request.

Contact information of where traveler(s) will be staying while in foreign or high-hazardous country(ies):
(i.e. phone number, email addresses)

Method(s) of transportation while in country(ies) (i.e., shuttle service, bus, taxi, rental car, etc.): _____

List all airports that will be visited during international travel: _____

Questions or special concerns: _____

For RMEHS Use Only:

Are any of the destinations on the U.S. Warning List Level 3 or 4, or a “war risk” country? ☐ Yes ☐ No

Comments: _____