# Form 1 - International Group Travel Description & Approval (Policy 4000-5-11)

## Trip Details

This form must be completed appropriately and submitted to the Dean/Director when seeking each level of approval for international group travel.

|  |  |
| --- | --- |
| Trip: |  |
| Travel Period: |  |

International Travel Policy: The College administrator approving international travel by a group of students must consider and ensure that The purpose of the trip is justifiable and consistent with College purposes and goals, College policies, intended learning outcomes, intended student experience and growth, etc.

### Purpose of the Trip

|  |  |  |
| --- | --- | --- |
| Items | Description of items including means of assessment provided by trip leader | Administration Approval |
| Purpose of the Trip |  |  |
| College goals addressed by the trip |  |  |
| Program and course learning outcomes addressed by the trip |  |  |
| Intended student experience and growth |  |  |

### Number of Travellers

#### Supervision Ratios

On a typical cultural or observational trip, a trip leader will supervise up to 30 adult students. Where, for example, health services are provided, supervision requirements may dictate a lower student-faculty ratio.

#### Approval for Associate Travellers

Approval for associate travellers must be requested using Form 10 – Request for Approval for Associate Travellers. Please attach Form 10 to this request.

Individual associate traveller names must be provided for approval of individuals by the dean.

|  |  |  |
| --- | --- | --- |
| Type of Traveller | Proposed Number of Travellers | Administration Approval |
| Students |  |  |
| Faculty |  |  |
| Other College Employees |  |  |
| Associate Travellers engaged to assist with the trip – attach a list of names |  |  |
| TOTAL TRAVELLERS |  |  |

## Approvals

### Approval for Budget Submission

This travel plan is approved for budget submission and will be included in the initial budget submission

* Yes – Administration Initials
* No – Administration Intitials

### Trip Leader Statement & Approval

#### Leader Statement

The trip leader is aware of and capable of meeting and completing the responsibilities of a trip leader.

I have ready and I understand the requirements of a trip leader as set down in the International Travel Policy. I will fulfill these requirements

Trip Leader Name:

Signature:

#### Trip Leader Approval

is designated and approved as Trip Leader for the above named and dated trip.

Dean/Administrator Name:

Signature:

## Health & Safety Measures

All reasonable considerations and steps have been and will be taken to ensure the health and safety of the trip participants.

The current travel advisory for the destination country issued by the Government of Canada (Foreign Affairs & International Trade Canada) is currently in the following zone:

|  |  |  |  |
| --- | --- | --- | --- |
| Check One | Advisory | College Action | Administrator Acknowledgement |
|  | Exercise Normal Security Precautions |  |  |
|  | Exercise a High Degree of Caution | Caution should be exercised. Administrator initials required. |  |
|  | Avoid Non-Essential Travel | Default decision is to deny travel. Administrator initials required. |  |
|  | Avoid All Travel | Default decision is to deny travel. Administrator initials required. |  |

## Trip Costs

### Cost to Each Student

|  |  |
| --- | --- |
| Item | Cost |
| Hotel & Other Accommodations |  |
| Travel (airfare, train, taxis, etc) |  |
| Meals |  |
| Travel Incidentals |  |
| Immunizations |  |
| Other Costs |  |
| TOTAL COST TO STUDENT |  |

### Cost to College

#### Direct Costs – costs requiring a direct financial outlay by College.

|  |  |
| --- | --- |
| Item | Cost |
| Hotel & Other Accommodations |  |
| Travel (airfare, train, taxis, etc) |  |
| Meals |  |
| Travel Incidentals |  |
| Immunizations |  |
| Payments to Engaged Associates |  |
| Payments for Faculty Replacements |  |
| Other Direct Costs |  |
| TOTAL DIRECT COSTS |  |

#### Indirect Costs – Refers to SWF time outside of, or in addition to, the actual travel time (e.g. travel planning time – calculate as (SWF page two hr/wk x 15 x $60/hr)

|  |  |  |
| --- | --- | --- |
| Item | | Cost |
| SWF time allocated (at perforated hourly rate) | |  |
| TOTAL DIRECT COSTS | |  |
| TOTAL DIRECT COSTS TO THE COLLEGE/STUDENT TRAVELLER | Total Direct Costs / # of Student Travellers |  |

## Continued Planning & Departure

At each stage of trip approval, the Trip Leader will need to complete and submit:

1. Form 2 – Trip Leader’s Checklist
2. Updated – Form 1 – International Group Travel Description & Approval

### Stage Approvals

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Stage | Administration Initials | | | |
|  | Budget Submission | Operational Planning | Financial Commitment | Departure Approval |
| Form 1 – Satisfactorily complete and current for consideration for approval for: |  |  |  |  |
| Form 2 – Satisfactorily complete for consideration for approval for: |  |  |  |  |

This trip is approved for operational planning purposes. No financial commitment by the college or students is approved.

Name: Title:

Signature: Date:

This trip is approved for the financial commitment of the college and students, and the engagement of suppliers, agents, and travel associates.

Name: Title:

Signature: Date:

This trip is fully approved and may depart.

Name: Title:

Signature: Date: