

**Student (Graduate and Undergraduate) Travel Risk Policy Risk Acknowledgement Form
Required for Travel Abroad on MIT Business**

Please read the MIT International Travel Risk Policy <https://icc.mit.edu/travel-abroad/safety-and-security/mit-international-travel-risk-policy> and other required sources noted below prior to completing and submitting form.

Traveler Name: _____
Student Type (circle or highlight one): Undergraduate, Graduate, (if recently graduated, date: _____)
MIT Department/Program: _____
Faculty Host / Lead: _____
Dates of Trip: _____
Country and Destination(s): _____
Emergency Contact (incl. phone): _____

← Check if applicable: I am traveling to my home country on MIT Business.

Attach itinerary (include modes of transport to, within, & from destination(s), accommodations, & schedule).

In connection with my trip to the above-referenced destination(s):

1. a. **Any Country:** I have carefully read the destination information in the Department of State's (DoS) Country Information, Center for Disease Control and Prevention (CDC) Travel Health Notices, and World Health Organization (WHO) for countries not specifically designated in the MIT Travel Risk Policy.

DOS Country Information: <https://travel.state.gov/content/passports/en/country.html>
CDC: <http://wwwnc.cdc.gov/travel/destinations/list> and
WHO: <http://www.who.int/countries/en/>

I have identified and considered the additional risks provided in this information for my travel. I will not travel to or through areas of heightened risk where the DoS is limited in its ability to provide consular services to US Citizens, or use any mode(s) of transportation which U.S. government personnel or their families are prohibited to use. I know these areas/modes of transportation may pose elevated risks of harm to me.

- 1 b. **Countries specifically under DoS, CDC, and WHO Travel Warning(s), Alerts or Notices:** I have carefully identified, reviewed and considered the risks of travel to my destination(s) in the MIT International Travel Risk Policy and including the most recent relevant DoS, CDC, and WHO Travel Warning(s), Alerts, Notices, or Advisories available at:

Department of State: <http://travel.state.gov/>
CDC: <http://www.cdc.gov/>
WHO: <http://www.who.int>

2. **Heightened Risks:** I know I am not required or encouraged to travel to areas of heightened risk and I may not be coerced to travel to my destination(s). I also know that there are heightened security, medical and/or natural disaster risks in these locales, and also where DoS, CDC, and/or WHO have issued a travel warning. I have decided to take this trip and I alone am responsible for the decision.

3. **MIT International Travel Risk Policy Waiver Requirement for Students:** I understand that MIT disapproves of, and MIT accounts may not fund any student travel to or through any area designated as 'Extreme' or 'High' under the MIT International Travel Risk Policy, unless a waiver for travel has been approved by MIT's Chancellor after submitting the '[MIT Student High Risk Policy Waiver Application](#)'. If a waiver for travel is granted, I will adhere to the approved itinerary and conditions imposed on the travel. I will not travel to or through areas of heightened risk where the DoS is limited in its ability to provide consular services to US Citizens, or use any mode(s) of transportation which U.S. government personnel or their families are prohibited to use. I know these areas/modes of transportation may pose elevated risks of harm to me.
4. **Insurance:** I understand MIT provides Student Study Abroad Health Insurance (<http://insurance.mit.edu/services/international-travel/mit-study-abroad-student-health-insurance>) for MIT Business travel abroad. I have read this information and understand the coverage and limitations therein. I understand I am responsible for providing my own coverage if my travel falls outside the parameters described. I understand that insurance coverage may not apply for unauthorized MIT Business travel.
5. **Updated Information and Trip Enrollment:** I know conditions in my destination(s) may change rapidly and will stay informed of current events on a frequent basis by reviewing updated security and health information from, and registering with, the nearest U.S. Embassy or Consulate General (see Travel Warning for contacts), and from the ISOS, DoS, CDC and WHO websites. I will also enroll in the Smart Traveler Enrollment Program (STEP) system with the U.S. Consulate(s) nearest my destination(s). If I am not a U.S. citizen, I will also register with my home country's Embassy or Consulate and get updated information from the U.S. and my home country's Embassies or Consulates.
6. **Travel Assistance:** I have obtained summary information regarding International SOS (ISOS) travel assistance services (www.internationalsos.com membership number 11BSGC000066). I will download a copy of the card from the International SOS MIT Membership website or alternatively, obtain a card from the Program for International Safety and Security (internationalsafety@mit.edu) or the Insurance Office (insurance@mit.edu). I will contact the Program for International Safety and Security or the Office of Insurance should I need additional information. If I need security or medical assistance or information abroad, I will call International SOS and then notify my program.

TRAVELER'S SIGNATURE

DATE

For Undergraduate Students (Required if student is under 18 years of age):

PARENT/GUARDIAN SIGNATURE

DATE

Please sign and file this form with: (1) Your Department Head and/or Program Manager, and (2) the Program for International Safety and Security (internationalsafety@mit.edu) PRIOR to traveling.