



INTERNATIONAL TRAVEL PRE-APPROVAL

THIS FORM MUST BE COMPLETED AND SUBMITTED PRIOR TO BOOKING INTERNATIONAL TRAVEL

ALL international business travel must be booked via a **Rutgers travel agency**.

Name and contact information for the Rutgers employee traveling:

Business Unit: _____
 Traveler Name: _____
 Phone: _____
 Email: _____
 Travel Dates: _____

Flight Information: Originating City: _____
 Destination City: _____
 Other Cities Visited: _____
 Flight Cost: _____
 Other Expenses (Estimated): _____
 Estimated total travel cost: _____

Business purpose for travel (attach additional sheets, if necessary):

Chancellor, Senior Vice President or Designee Approval

Signature: _____
 Name: _____
 Title: _____
 Date: _____

University Procurement Services Review

Signature: _____
 Name: _____
 Title: _____
 Date: _____
 Tracking #: _____

Risk Management and Insurance Review

Signature: _____
 Travel Registration: _____
 International Travel Health: _____

I acknowledge that I am responsible for my own safety and well-being while traveling internationally. I understand that Rutgers cannot be held responsible for an illness or injury to my person. I accept the risk that my health and safety cannot be assured and that Rutgers may be unable to extend resources in the event of an international emergency, given the circumstances of traveling during an ongoing pandemic threat and against the advice of the University.

Traveler Signature _____

Date: _____