



University Travel Advisory Committee

4400 University Dr.,

Fairfax, VA 22030 MSN 6D6

Phone: 703.993.2599 | Email: utac@gmu.edu | Web: internationaltravel.gmu.edu

Application for Travel to Hazardous Areas and Countries Under Comprehensive Economic Sanctions

George Mason University Policy 1134 regulates travel to a hazardous location and to countries under comprehensive economic sanctions (referred to henceforth as 'Hazardous Areas'). Please see Policy 1134 for the definition of Hazardous Areas. The University Travel Advisory Committee (UTAC) may grant exceptions to this policy on a case-by-case basis. UTAC strongly recommends that no travel arrangements be made until approval has been received. Requesting an exception from UTAC does NOT guarantee travel approval.

UTAC applications should be submitted at least 30 days, but no more than 2 months, before proposed travel. See Section XII for application submission instructions. Activities subject to U.S. Foreign Assets Control may require additional time to process required licenses. George Mason University cannot guarantee pre-departure approval decisions for late applications and will not review travel after it has already taken place. UTAC will issue approval/denial within 10 business days of receiving an application; five business days if expedited review is requested and warranted.

Please complete this form in its entirety to include the appropriate approval signatures in section XI.

SECTION I: TRAVELER/TRIP LEADER INFORMATION

Name:

College, School, Administrative Department:

University G#:

Title/Position:

University Email:

I am:

Faculty*

Student

Staff

Other (explain below):

*Research, Instructional,
Adjunct, or Administrative

Cell Phone #:

SECTION II: TRIP DETAILS

Trip Itinerary: List all countries/cities that will be visited; including side trips:

Country	City	Arrival Date	Departure Date

Hazardous Travel Issues: Check all conditions that apply to travel area(s) listed above and provide brief responses where warranted:

☐

[Department of State \(DOS\) Travel
Advisory Level 3 \(Reconsider Travel\) or 4
\(Do not Travel\)](#)

☐

[Centers for Disease Control & Prevention Warning Level 3 or 4](#)

☐

[Comprehensive Economic Sanctions/Embargoed Areas](#)

Briefly describe the reason for the alert(s) or warning(s) issued for the travel area(s):

SECTION II: TRIP DETAILS (continued)

Country(ies) Details: Are there currently any entry or exit restrictions for the location(s) you plan to visit?

Travel Details: Are you a citizen of the country(ies) you plan to visit? If yes, which country(ies): ☐ Yes ☐ No

Do you have extensive experience traveling to this area/these areas? If yes, which country(ies): ☐ Yes ☐ No

Is this travel a component of a degree program and/or will participants be receiving academic credit for this experience? Yes No N/A

Type of Activity/Program:

<input type="checkbox"/> Academic Program	<input type="checkbox"/> Educational Travel	<input type="checkbox"/> Lecture	<input type="checkbox"/> Training
<input type="checkbox"/> Conference	<input type="checkbox"/> Field Work	<input type="checkbox"/> Research	<input type="checkbox"/> Volunteer

Frequency of Travel:

One-time Program Recurring Program

Will any university or external sponsoring agency be providing funding for this travel experience? Yes No

If yes, please indicate where your funding will be coming from:

SECTION III: HOUSING AND TRANSPORTATION

Accommodations:

I will be staying at a: Hotel University Operated Dorm/Housing Home Stay Other

Please describe Other:

Transportation:

Will you be utilizing public transportation (public bus, taxi, train, etc.)? Yes No

Has private transportation been arranged for you/your group? Yes No

Do you plan on operating a rental vehicle? Yes No

(You must be in compliance with [University Policy 1411](#) in order to operate a rental vehicle for Mason Business).

SECTION IV: GROUP TRAVEL

Are you completing this application for independent travel or on behalf of a group?

☐ Individual ☐ Program/Group (e.g., research team, study abroad program, travel with students, etc.)

Total Number of Travelers:

Undergraduate Student(s):	
Graduate Student(s):	
Faculty/Staff(s):	
Travel Companion(s) or Guest(s):	

Program Name, Name(s) of Travel Companion(s) or Guest(s):

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*Individual group members must review this application and sign in Section XI.

SECTION V: EMERGENCY CONTACT INFORMATION

Personal Emergency Contact Information Abroad: Please provide the cell phone number and email address that you will use abroad.

Email: ☐ Same as Section I

Cell Phone #: ☐ Same as Section I

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Stateside Emergency Contact Information: Please provide the name and contact information for an individual (e.g., family or friend) living in the United States who the university can contact in the event of an emergency.

Emergency Contact Name:

Emergency Contact Phone #:

Relation:

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Destination Country Emergency Contact: Please provide contact information for an individual in the destination country in case of emergency or in the event that you do not make contact with your stateside contact in accordance with your Communications Protocol (see Section VIII-C).

Contact Name:

Title:

Organization:

Email:

Cell Phone #:

Work Phone #:

Address:

Relation:

SECTION VI: COLLEGE, SCHOOL, AND DEPARTMENTAL CONTACT

Provide a university college, school, or administrative department contact for university administration to work with in the event of an emergency or crisis. This will be the Mason contact you communicate with in accordance with your Communications Protocol (see Section VIII-C).

Contact Name:

Title:

College, School, or Department:

Email:

Cell Phone #:

Work Phone #:

SECTION VII: EXPORT AND SANCTION ISSUES

Will you hand carry or ship any of the following? (Check all that apply and describe below).

Mason Laptop

Mason Equipment

Technology/Intellectual Property

Biological/Chemical Samples

Are you collaborating or meeting with any international partners, potential collaborators, institutions or individuals, or attending any conferences? If yes, please provide their names and affiliated institutions and/or conference host/organizers below. (if more space is needed than provided below email list to export@gmu.edu)

Will you bring back into the U.S. any samples, equipment, technology or intellectual property, such as blueprints, diagrams, engineering designs and specifications, CAD files or similar items that you did not take with you?

☐ Yes ☐ No

If yes, please describe:

In addition to UTAC approval, travelers **are required** to receive approval from Office of Research Integrity and Assurance (ORIA), in advance of their trip, if they are:

1. **traveling with university-owned equipment, including laptops**, or export-controlled technical information (technical information that is not educational materials, publicly available, or the results of fundamental research);
2. traveling to a country under comprehensive economic sanctions; (Cuba, Iran, North Korea, Syria, and the following regions in Ukraine due to Russia's actions: Crimea, the so-called Donetsk People's Republic (DNR) and the Luhansk People's Republic (LNR));
3. working under a Technology Control Plan (TCP) *and* traveling to a country under [DOS military embargo](#); or;
4. providing services to foreign nationals (for example, consulting) or providing training to foreign military organizations or any pseudo-military groups such as first responders.

SECTION VII: EXPORT & SANCTIONS ISSUES (CONTINUED)

Do any of these conditions apply?

Yes Unsure No

If "Yes" or "Unsure" contact ORIA at export@gmu.edu to discuss your travel and receive approval

If you are traveling with a Mason-owned laptop or equipment, you will need to complete on-line training and submit a laptop or equipment certification form, email ORIA for instructions.

Have you discussed your travel plans and items you intend to take with you with ORIA?

Yes No Not Applicable

SECTION VIII: EXPLANATION OF TRAVEL

A. Program

Provide a statement detailing the compelling reason why travel must take place in the proposed location and why you cannot engage in either a similar or alternate program in a different location (please identify any negative consequences of not conducting travel).

B. Health, Safety, and Security Mitigation Plans

Describe the steps that will be taken for mitigating the specific health, safety, and security risks identified by the U.S. Department of State Travel Advisory or CDC Warning (examples of such measures might include avoiding travel to certain neighborhoods in a city or regions within a country, using only specific means of transportation, not traveling alone after dark, and steps that will be taken to mitigate the risk of contracting a communicable disease).

C. Communications Protocol

Provide a brief explanation of how routine communication will be maintained with the university and participants (if leading a group). This protocol must include the method and frequency of contact (recommended to be no less than twice per week) with the departmental contact listed in Section VI

Contact Method:

Phone Email Other:

Frequency of Contact (required upon arrival, prior to departure, and **twice weekly for travel a week or longer**):

Arrival	Monday	Tuesday	Wednesday	Thursday	Friday	Departure
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Time Difference from Mason (EST):

Hours

Cell Phone Reception in Area:

Internet Availability in Area:

[Look up the destination time here.](#)

SECTION VIII: EXPLANATION OF TRAVEL (Continued)

If cell phone/internet is not available, describe communications plan with Mason contact and, if applicable, other members of travel party:

Your departmental contact is instructed to alert UTAC if you do not make contact at the agreed upon times so that appropriate action can be taken to help you, if necessary.

☐ I have discussed my communication protocol with the departmental contact cited in Section VI. They accept responsibility to monitor my travel and agree to contact UTAC if communication is missed.

SECTION VIII: TRAVEL REGISTRATION

All travelers are required to register international travel with the university.

Faculty and Staff: Faculty and employees traveling on university-sponsored or university-related business are required to register their travel in Mason's Finance Gateway (<https://fiscal.gmu.edu/mason-finance-gateway/>).

Academic Directors/Trip Leaders: Are required to coordinate group student travel/programs through Mason Study Abroad or ensure that all students/participants register travel with the Mason Abroad Travel Registration System (<http://masonabroad.gmu.edu/>).

Individual Student Travelers: Are required to register travel in the Mason Abroad Travel Registration System (<http://masonabroad.gmu.edu/>).

I will/have register(ed) travel according to the requirements outlined above.

SECTION X: HEALTH AND INTERNATIONAL EMERGENCY INSURANCE

Health Insurance: All travelers participating in university sponsored travel must maintain personal medical insurance for the duration of travel. Please note that personal and institutional insurance carriers may deny service (i.e., repatriation or evacuation services) if traveling to an area known to have increased risks, disease, or political instability.

I will maintain a personal health insurance policy for the duration of travel.

International Emergency Insurance: The university provides international emergency insurance to supplement personal insurance and to assist in emergency situations such as medical emergencies and repatriation due to emergency or natural disaster.

Faculty and staff are provided international emergency insurance upon employment. For more information on accessing coverage, please visit <http://risk.gmu.edu/international-travel-insurance>.

Students are required to register travel and purchase international emergency insurance through the Mason Abroad Travel Registration System. Students are prompted to purchase insurance during the registration process.

SECTION XI: SIGNATURES

(Travelers please provide your signature in the individual traveler, academic director or trip leader section and obtain approval from your supervisor prior to submitting your application to UTAC for review. Individual Travelers/Trip Leaders cannot also sign as the approver).

Program Chair, Director of Department, Dean, or Director of School:

By checking this box and typing my name below, I certify that I have reviewed this application and agree that the requested travel is necessary for work, academic, or educational purposes and support the requested travel.

Name:

Title:

Date:

Individual Traveler, Academic Director, or Trip Leader:

☐ By checking this box and typing my name below, I certify that I have reviewed and completed this application to the best of my ability. I have read and agree to the conditions outlined in Appendix A: Assumption of Risk for Travel to Hazardous Areas.

Name:

Date:

Participants:

By checking the box and typing my name below, I certify that I have reviewed this application and agree to the conditions outlined in Appendix A: Assumption of Risk for Travel to Hazardous Areas.

X	Name	Date

SECTION XII: SUBMISSION INSTRUCTIONS

UTAC applications should be submitted at least 30 days, but no more than 2 months, before proposed travel, to utac@gmu.edu. If electronic submission is not an option, submit hard copies to:

University Travel Advisory Committee
c/o Operational Risk Management
4400 University Drive, MSN 6D6, Fairfax, VA 22030

Located on the 5th floor of the Merten Hall, Suite 5300 (Fairfax campus).

APPENDIX A: ASSUMPTION OF RISK FOR TRAVEL TO HAZARDOUS AREAS

I am aware that my travels will take me to a region under a United States Department of State (DOS) Travel Advisory Level 3 (Reconsider Travel) or 4 (Do not Travel), Centers for Disease Control and Prevention (CDC) Level 3 Warning or higher, or a country under comprehensive U.S. Economic Sanctions. I confirm that I have read and understand the DOS Travel Advisory for this country and that, despite this travel advisory, I have made the decision to proceed.

I recognize that there are risks associated with all international travel. I further understand and acknowledge that travel to this country at this time exposes me to risks of a greater likelihood and magnitude than those normally associated with international travel. These risks include, but are not limited to, those described within the DOS Travel Advisory, as well as risks associated with ground, air or water transportation, adverse weather conditions, communicable disease, medical care, substandard building construction or maintenance, civil unrest, terrorism, war, and negligent or criminal acts of third parties. I understand that should any of these adverse circumstances occur the result could include bodily injury, death, or property damage. I recognize that the Commonwealth of Virginia, the Rector and Visitors of George Mason University, its employees, and agents (hereinafter collectively referred to as the "University") cannot guarantee my safety. I acknowledge that the institutional emergency travel insurance carriers may deny requests for repatriation, evacuation, or emergency medical services or reimbursements due to the increased known risks, disease, political instability, or other known hazardous / potentially hazardous conditions of destination country or area.

I agree that during my trip that it will be my responsibility to regularly check the Department of State website/ CDC and other websites to stay apprised of, and updated on, any and all travel advisories to the places I am currently visiting or will visit as part of my travel.

I understand and acknowledge that this travel is restricted by University Policy 1134. I have read Policy 1134 and the associate procedures and will fully comply with the policy and procedures as well as any directive or instructions issued by UTAC of the University regarding this travel. In full consideration of the risks associated with this travel and the restrictions the University places on such travel, I understand and acknowledge that I am submitting this application for an exception to University Policy Number 1134 under my own free-will and without any threat, duress or coercion by the University.

Furthermore, I agree to comply with all United States, international, and host country import/export controls and sanctions that apply to the countries that I will enter during this travel. If applicable, I have consulted with George Mason University's Office of Research Integrity and Assurance regarding the export or import of hardware, intellectual property, and computer equipment that may be subject to Federal export controls and sanctions. Prior to departing the U.S., I will ensure that I have obtained all necessary U.S. government licenses and/or have satisfied all applicable general license or license exception terms and conditions. I will retain all required documentation concerning export controls and sanctions regulations for the required time period or 5 years from my return to the U.S., whichever is longer, and will promptly provide copies of this documentation to George Mason University upon its request.

With the intent to be legally bound, I acknowledge and represent that I have read this Assumption of Risk for Travel to Hazardous Areas and understand that by signing this Application for Travel to Hazardous Areas and Countries under Comprehensive Economic Sanctions I demonstrate my agreement with the terms set forth herein, with full knowledge of the possible risks associated with travel abroad.

FOR UTAC USE ONLY

Name of Applicant:

Hazardous Travel Area:

Dates of Travel:

Date of Review:

☐ **APPROVED** without stipulation

☐ **APPROVED** with the following conditions:

☐ **DENIED** for the following reason(s):

UTAC Co-Chair or Designee Name:

UTAC Co-Chair or Designee Title:

UTAC Co-Chair or Designee Signature:

Date of Approval:

APPROVED Travel:

If your request for a hazardous travel exemption was approved, you may travel subject to any conditions stated above. In addition, you must complete the Individual/Group Trip-Specific International Travel Emergency Plan and the International Travel Checklist. These forms are available online at internationaltravel.gmu.edu for personal use; they do not need to be submitted. Be reminded, student travelers must register their travel with the Mason Abroad Travel Registration System prior to departing.

Changes in travel and/or conditions after UTAC Approval:

If travel plans are adjusted after UTAC approval has been granted; the traveler or program/activity sponsor is responsible for contacting UTAC to discuss modified travel arrangements. If there is a change in circumstances – in terms of the proposed itinerary, the critical nature of the trip, or the health, safety, or security climates of the region of interest – either prior to, or after departure, the University retains the right to rescind UTAC travel approval and/or require return to the U.S.

DENIED Travel:

If your request for a restricted travel exemption was denied, the proposed traveler(s) are not authorized to travel to the restricted region. Travelers who engage in unauthorized travel may not receive any sought academic credit as per George Mason University Policy 1134 – *University-Sponsored or University-Related International Travel*, may not be reimbursed for any expenses associated with their travel (if eligible) as per George Mason University Policy 2101 – *Travel Authorization and Reimbursement*, and may be subject to disciplinary action. Appeals to the UTAC decisions should be directed to the Office of the Provost for academic travel and the Senior Vice President for Administration and Finance for operational travel.

NOTE: Due to the dynamic nature of risk management concerns for any given country, any approved UTAC exemption applies ONLY to this trip and for the stated in-country dates provided on this application. Future travel to a restricted country will require a new request for UTAC exemption. George Mason University reserves the right to revoke approval or recall exempted travelers on short-notice if circumstances warrant such action.

TRIP ITINERARY (EXTRA SPACE)

Country	City	Arrival Date	Departure Date