



# Steward Observatory Business Office Proxy Registration Questionnaire



(Required for Foreign Travel ~ ALL Questions must be Answered)

1. Employee/DCC/Student First & Last Name: \_\_\_\_\_

2. Is the Traveler a DCC?     YES     NO                      DCC Type: Affiliate     Associate

DCC-Affiliates are not covered by the state insurance program and the affiliate institution is responsible for providing duty of care and insurance. DCC-Associates and Volunteers may fall within the state insurance program and UA duty of care, which includes UA review and authorization of travel on behalf of UA.

3. What country are you a citizen of: \_\_\_\_\_

If a dual citizen, please also note under which passport will be used

4. Contact Information (Please list *TWO* means of communication while abroad):

1. \_\_\_\_\_

2. \_\_\_\_\_

5. Emergency Contact:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

6. General Travel Experience (\*)

- |   |  |
|---|--|
| <input type="checkbox"/> Frequent Traveler                                  | <input type="checkbox"/> Novice Traveler     |
| <input type="checkbox"/> Frequent Traveler with safety training / Expertise | <input type="checkbox"/> Occasional Traveler |

7. Experience in the destination(s)

- |   |  |
|---|--|
| <input type="checkbox"/> Area research knowledge, but no travel experience                  | <input type="checkbox"/> Previous travel to the destination(s) |
| <input type="checkbox"/> Extensive travel to the destinations                               | <input type="checkbox"/> Residential experience                |
| <input type="checkbox"/> No experience  | <input type="checkbox"/> Travel is from this area              |
| <input type="checkbox"/> Previous travel in the area, but not to this/these destinations(s) | <input type="checkbox"/> Traveler is from this town/city       |

8. What is the primary purpose for this travel? (\*)

- |  |   |
|--|---|
| <input type="checkbox"/> Athletics                           | <input type="checkbox"/> Other meetings             |
| <input type="checkbox"/> Attending a conference              | <input type="checkbox"/> Presenting at a conference |
| <input type="checkbox"/> Collaboration Development           | <input type="checkbox"/> Sabbatical                 |
| <input type="checkbox"/> Faculty-Led study abroad Programs   | <input type="checkbox"/> Visiting scholar           |
| <input type="checkbox"/> Field Trip with students            | <input type="checkbox"/> Archival research          |
| <input type="checkbox"/> Graduate research for course credit | <input type="checkbox"/> Field Research             |
| <input type="checkbox"/> Other _____                         |   |

## 9. Remote Locations

Describe or list travel to satellite locations, small villages, or other remote locales.

## 10. Is a Technology Control Plan involved in this travel? (\*) YES NO

Does this travel include substances, software, technology, data, or equipment related to a project that is (or has been) protected with a Technology Control Plan (TCP)?

**IF YES**, well in advance of departure the University Export Control Program (UECP) must determine if government authorization is required. If needed, UECP will apply for the license. Authorization/licenses can take several months to receive from the government agency and travel with the item(s) cannot occur until the authorization or license is received.

## 11. Group Travel? YES NO

Is a group traveling?

**IF YES**, please list the members of the group and indicate if there is a **lead traveler** or **primary point of contact** organizing the travel plans. Please indicate the UA affiliation of members of the group (undergraduate student, graduate student, community members, DCC).

## 12. Is this travel essential in regards to activities or timing? (\*) YES NO

**IF YES**, provide a brief statement explaining the essential nature and activities of this trip.

**13. Lodging Information**

Please enter the name(s) of anticipated hotel(s) or dormitory or address of house or apartment in each location and indicate if this is **designated** or **recommended** lodging. Please include website or physical address. If you are uncertain, indicate potential lodging options.

**14. Are any ITAR materials involved in this travel? (\*)**  YES  NO

Will this travel involve any ITAR substances, software, technology, data, or equipment found on the United States Munitions List?

**IF YES**, a government authorization is required PRIOR to departure. The University Export Control Program (UECP) will need to apply for authorization from the U.S. Department of State's Directorate of Defense Trade Controls. Authorization/licenses can take several months to receive and travel with the item(s) cannot occur until the authorization/license is verified.

**15. Will equipment be transported? (\*)**  YES  NO

**Answer NO** for general purpose off-the-shelf items such as laptops, flash drives, smartphones, iPads, cameras (e.g. used for general, unspecific photography), etc. **Answer YES** if you are taking items including test or specialized equipment or prototypes and describe the equipment and its use.

**16. Is travel connected to a US federal contract or involve work on a U.S. military base?**  YES  NO

**Answer YES** only if this travel is connected to a federal contract and the traveler will serve as a federal contractor or subcontractor or is on "lands occupied or used by the U.S. for military purposes in any territory or possession outside the United States." **This DOES NOT include federal grants.** **IF YES, an Application for Defense Base Act (DBA) Insurance must be submitted to Risk Management Services.**  
**Answer NO** if this travel is funded by a federal grant, cooperative research agreement, or any other funding source and is not on "lands occupied or used by the U.S. for military purposes in any territory or possession outside the United States."

**17. Are any of the dates or locations included in this registration for personal travel?**  YES  NO

**Answer YES** if personal travel is included in this registration and provide the dates and location(s).

**18. Health & Safety Precautions (\*)**

- Alert other to medical concerns (including allergies)
- In-country support & contacts
- Provide itinerary changes to Emergency Contact
- Review country crime & safety information at <http://travel.state.gov/content/passports/en/country.ht>
- Review recommended immunizations and medications at <http://wwwnc.cdc.gov/Travel>
- Travel with Embassy/ Consulate Emergency Number
- Travel with a group
- Travel with emergency cash
- Use Chubb Travel app (<https://www.chubbtravelapp.com> with policy #PHFD3855170A 001)
- Provide Emergency Contact with number for UA International Emergency support (520)307-9576
- Travel with number for UA international Emergency support (520)307-9576 (call/text anytime)

**19. Immunizations (\*)**       YES     NO

I understand that travelers are expected to consult the CDC Travelers' Health website regarding required and recommended vaccinations and to check for any Health Notices or Alerts. You may also consult UA Travel Clinic.

**20. Insurance Coverage (\*)**     YES     NO

UA international travelers on UA business, including employees, students traveling as employees, students in professional training programs, and volunteers under the UA's direction, are provided insurance coverage for:

- Liability incurred abroad (including vehicle use),
- Emergency medical care, and for employees - work related injury benefits, and
- A variety of emergency assistance services, including emergency medical or emergency evacuation (for specific circumstances).

Students traveling abroad as part of a UA approved academic or research activity (other than Study Abroad) are provided coverage for emergency medical care and emergency services in the same manner as UA employees traveling on UA business. The program for emergency medical care covers unforeseen medical care needs only, and does not cover continuing care for existing conditions or routine appointments. Travelers that anticipate the need for continuing medical care while abroad must make their own arrangements for coverage. Liability coverage is also applicable for students traveling in an official UA capacity (employee or volunteer), and when international travel has been approved as a required part of the student's academic training program or curriculum. UA insurance coverage is not applicable for independent travel or research. For more information, see <http://risk.arizona.edu/international-travel>.

**21. Department Head/Director/Dean Information (\*)**

Please provide the name, title, and email of the appropriate Department Head/Director/Dean, if additional approvals are needed

### 1.) Essential Travel for Traveler

Please briefly state why this travel is essential to your work and/or role at the University of Arizona.

### 2.) Entry Restrictions or Barriers

Please identify any COVID-19-related restrictions or barriers in conducting University business for the travel destination(s) you will be visiting (e.g. entry restrictions for U.S. travelers, mandatory quarantines upon arrival, curfews, "stay at home" orders, etc.):

### 3.) Extended Stay Contingency Plan

Please describe your contingency plan should a mandatory stay-at-home/quarantine order come into effect at your destination or should you test positive for COVID-19. Include how you would obtain and pay for housing, food and access to medical care and logistical support if you were forced to extend your stay. Additionally, what will be your funding source should an extended stay be required?

NOTE: This plan and additional costs should be reviewed by the department business office for budgetary oversight.

### 4. Healthcare Facility Location

Below, please indicate that you understand that you are strongly advised to locate healthcare facilities in your destination(s) before traveling abroad..

For assistance in finding such facilities near your travel location(s), please refer to the following:

- The University's emergency travel insurance carrier, Zurich Travel Assist at 1-844-593-8860, ensuring you relay the Policy Number to be GTU 3032184 through the State of Arizona
- The Center for Disease Control & Prevention (CDC)'s "Getting Healthcare Abroad" page
- You can find lists of doctors and hospitals in the country you are visiting on the U.S. embassy and consulate websites, under the "American Citizens Services" heading.

I understand that I am strongly advised to locate healthcare facilities prior to my departure.

### 5.) Transportation Plan

In the space below please provide information on the safety measures you plan to use while traveling in the location/s of your travel to limit exposure to COVID-19. If unsure, please visit UA Global Travel's COVID-19 Travel Advice page and the CDC's "Protect Yourself When Using Transportation" website.

### 6.) Local Contacts

Please provide the names and contact information of individuals on the ground at your destination(s) who will be able to assist you if needed:

### 7.) Optional Additional Information

In the space below, please provide any further information about this travel you feel is relevant for its review, such as language fluency or past experiences in the destination country or region.

### 8.) Agreement to Safely Conduct University Business.

Please review the following carefully and indicate your agreement to follow these guidelines below:

- Review CDC guidelines before departure
- Complete a self-assessment according to CDC guidelines prior to departure
- Actively socially distance, disinfect high-touch surfaces and wear a face covering when around others
- Cancel travel if experiencing symptoms associated with COVID-19 within two weeks of departing
- If displaying symptoms associated with COVID-19 during travel, cancel any further University in-person business, contact local health officials, and self-quarantine until consultation with a medical professional
- Follow CDC guidelines for returning from your travel

I have read the agreement above and agree to abide by these guidelines

# Security Alerts & Emergency Travel Insurance

Faculty/Staff Travel (Year of Departure, 2021)



UA GLOBAL TRAVEL is pleased to announce new partnerships with [Drum Cussac](#) (Drum), a leader in global travel risk management and [Zurich Travel Assist](#).

## Drum Cussac

Through Drum, all UA faculty, staff and students now have access to a portal, which provides in-depth safety and security information and travel advice for locations around the globe. Simply [Log in here](#) using your UArizona NetID and password to peruse their analyses, intelligence and travel advice.

Additionally, Drum Cussac also offers a phone app for [Android](#) and [iPhone](#) that provides the following services for any UArizona travelers who install the app;

- SMS, text and/or email notifications for health/safety/security incidents occurring in the proximity of your travel
- An SOS button travelers can push in an emergency for immediate support
- 24/7 emergency assistance and advice

Once your travel is successfully reviewed and processed by Global Travel, we will upload your trip to the Drum platform enabling alerts relative to your location. You will also receive an email from Drum Cussac providing travel advice for the destination(s) in your itinerary. You may reach out to Drum Cussac for specific travel advice based on location, Drum Cussac alerts, if you feel your safety is threatened.

## Zurich Travel Assist

You will be covered by the emergency travel insurance carrier, Zurich. If you require emergency evacuation or travel assistance, please contact Zurich Travel Assist directly. You can access their contact information and your travel card on UArizona [Risk Management's website](#). Additionally, you can access more information (including what is covered and what is not covered) by going to [this website](#) and clicking on the tabs [International Insurance Coverage for Faculty and Staff](#) or [International Insurance Coverage for Student Travel](#).

If you have any questions about any of this coverage, please do not hesitate to reach out to UA Global Travel.

**Mark as read**

# Information & Technology Security

## Faculty/Staff Travel (Year of Departure, 2021)



**INTERNATIONAL TRAVEL** can pose significant risks to information stored on or accessible through computers, tablets and smartphones that we take with us.

This risk is associated with:

- Increased opportunities for the loss or theft of the device, and
- Increased exposure to untrusted Internet connections.

You are strongly encouraged to take the following steps prior to your departure:

### **DURING YOUR TRAVEL**

- Travel light: Leave any electronic device (laptop, cell phone, or tablet) not needed at home.
- Get a loaner: Take a loaner laptop with you on your trip, if your department can provide this, and request that it be encrypted.
- Travel with "clean" devices: If your department can't loan you a laptop, remove sensitive data from any devices you choose to take. You should NOT travel with regulated or confidential data, unless it is absolutely required.
- Erase history, including, browser history, especially saved passwords.
- Use strong passwords and device timeouts:
  - Set up your devices to time out and require a password when idle.
  - Set your device to erase memory after 10 incorrect login attempts.
- Go disposable: If you require a cell phone while overseas, consider purchasing a "burner" or disposable phone in the destination country. Be sure to email [UA Global Travel](#) with your new phone number once you acquire it.
- Encrypt devices: All devices, whether University-owned, personal, or "loaners," should be encrypted. However, ensure that your destination country allows use of encryption PRIOR to your trip.

### **DURING YOUR TRAVEL**

- Login with the lowest possible privilege level: Logging to your devices with user accounts rather than as an administrator significantly decreases risk to cyber threats.
- Do not auto-connect: Turn off wireless and Bluetooth connectivity when not actively used.
- Take precautions when using a "public" device (e.g. hotel computers).
- Keep track of passwords used during travel.
- Keep your technology with you.
- Clear your Internet browser history after each use.
- If you become aware of suspect one or more of your devices have become compromised, report to the following:
  - Your Department Head
  - Your Departmental IT Support or the UA's 24/7 IT Support Center at 520-626-TECH (8324) or via Live Chat
  - The local US US Embassy or Consulate

### **AFTER YOUR TRIP**

- Change your passwords
- Scan your devices for Malware and other harmful material: Should you need assistance, consult with your Departmental IT Support or the UA's 24/7 IT Support Center

**MARK AS READ**



## Travel to Higher Risk Locations

For UArizona Travelers heading to destinations assessed to carry higher risk, UArizona Travel Policy requires Global Travel to seek approval from the University of Arizona's International Travel Safety and Oversight Committee.

If the travel contained in this registration is deemed to be higher risk, following submission of the registration Global Travel will email the traveler asking them to fill out a brief supplemental travel information.

**MARK AS READ**

## COVID TRAVEL - BEST PRACTICES

The University of Arizona is monitoring the COVID-19 pandemic and we have created a central site with updates and advice on how to protect your health. We advise you to continue to stay informed of the situation through reputable sources, such as the U.S. Centers for Disease Control & Prevention (CDC), U.S. Department of State, and the World Health Organization (WHO).

In addition, if you have not done so, please review UA Global Travel's "COVID Travel Advice" for a more detailed description of what to expect during your travel along with a list of suggested practices for different modes of transportation and lodging.

Last, please continue to follow these practices throughout your travel:

Last, please continue to follow these practices throughout your travel:

- Avoid contact with sick people.
- Wash hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer.
- Avoid animals (alive or dead), animal markets, and products that come from animals (such as uncooked meat).
- Ensure you bring at least two acceptable face masks along with other personal protective equipment deemed appropriate
- Ensure you bring a working thermometer and check your temperature on a daily basis

What should you do if you feel sick?

- Stay home. Except for seeking medical care, avoid contact with others.
- Seek medical care right away. Before you go to a doctor's office or emergency room, call ahead and tell them about your recent travel and your symptoms.
- Do not continue traveling while sick and postpone in-person meetings until you are symptom-free (see CDC guidance here).
- Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.
- Wash hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer.

**MARK AS READ**

**Travelers Signature:** \_\_\_\_\_

# TRAVEL AUTHORIZATION FORM

T \_\_\_\_\_

\* ALL TRAVEL AUTHORIZATIONS NEED TO BE FULLY SUBMITTED 30 DAYS PRIOR TO THE DEPARTURE DATE

## TRAVELER INFORMATION

EMPLOYEE NAME: \_\_\_\_\_ EID /STUDENT ID #: \_\_\_\_\_

DUTY POST: \_\_\_\_\_ TYPE: EMPLOYEE STUDENT DCC

## RESEARCH / BUSINESS PURPOSE

SUBMIT ATTACHMENT: EVENT ANNOUNCEMENT FLIGHT ITINERARY LODGING INFO OTHER \_\_\_\_\_

## ACCOUNTING INFORMATION

PAID BY HOST: INSTITUTE: \_\_\_\_\_ TRAVEL ADVANCE NEEDED: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ UNIT: \_\_\_\_\_ ADVANCE AMOUNT: \$ \_\_\_\_\_

ACCOUNT AND/OR UNIT RESPONSIBLE FOR ANY CHARGES IF INCURRED CHECK DIRECT DEPOSIT

**TRAVEL ADVANCE: 10 DAYS TO PROCESS/ ISSUED 5 BUS. DAYS BEFORE DEPARTURE/ RECEIPTS ARE DUE WITHIN 30 DAYS OF RETURN**

## TRAVEL DETAILS

FY BLANKET TRAVEL: \_\_\_\_\_

START DATE - END DATE

TRAVEL TYPE: IN-STATE \_\_\_\_\_ MILES FROM DUTY POST DOMESTIC  
(MUST BE 35 MILES FROM HOME/DUTY POST)

FOREIGN REGISTRY#: \_\_\_\_\_  
(MUST BE FULLY SUBMITTED & APPROVED 30 DAYS PRIOR TO TRAVEL)

PRIMARY DESTINATION: \_\_\_\_\_  
CITY STATE COUNTRY

CITY/STATE/COUNTRY DEPARTING FROM: \_\_\_\_\_ CITY/STATE/ COUNTRY RETURNING FROM: \_\_\_\_\_

DEPARTURE DATE: \_\_\_\_\_ RETURN DATE: \_\_\_\_\_

30 DAY TRAVEL: NUMBER OF WORK DAYS: \_\_\_\_\_ PERSONAL DATES: \_\_\_\_\_

\*IF WORK DAYS EXCEEDS 30: DAY 1 THRU 7 WILL BE REIMBURSED AT THE FULL POLICY RATE & AFTER IT WILL BE 50% MEALS / 25% LODGING \*      \* COST COMPARISONS ARE REQ. AT TIME OF PURCHASE IF NOT A DIRECT FLIGHT TO PRIMARY DESTINATION \*

## EXCEPTIONS

DESIGNATED LODGING: \_\_\_\_\_ JUSTIFICATION/REASON: \_\_\_\_\_  
(EX. CAR UPGRADE/AIRLINE UPGRADE/EXTRA BAGGAGE)

MODE OF TRANSPORTATION:

- PERSONAL VEHICLE
- MOTOR POOL VEHICLE
- RENTAL CAR

P-CARD PURCHASE: AIRPLANE

**WITH INTERNATIONAL TRAVEL THE "FLY AMERICA ACT" APPLIES / AN EXPLANATION IS REQUIRED FOR ALL TYPES OF UPGRADES**

## TRAVELER AGREEMENT AND FUNDING APPROVAL

TRAVELER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PI / CO-PI / DELEGATE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_