

COVID-19 International Travel Request Form
The University of Mississippi

This form is to be submitted prior to any UM-affiliated international travel during the COVID-19 Emergency period. Prior to making any reservations or commitments, please forward this signed form to the Provost's Office (sdismuke@olemiss.edu) for pre-approval before (or along with) the required Travel Authorization.

Date: _____ Department: _____

Name of Traveler: _____ Phone: _____

Traveler's E-Mail Address: _____

Travel Date(s): _____

Destination(s): _____

Purpose of Travel: _____

Check if Related to Research or a Sponsored Program: (Provost will route checked request to VCRSP for addtl. review. Research is a mission critical function of UM.)

Please explain why this international travel is essential to advancing mission critical UM activities, and should not be delayed until after the COVID-19 Emergency period. Attach additional sheets/files with this form if needed.

Four horizontal lines for providing a response to the previous question.

Please explain whether and how all safety precautions recommended or required by the destination country are being met to ensure your safety and the safety of the University community from spread of the Coronavirus. This statement should include explicit statements about social distancing, masks, and other appropriate safety practices for minimizing spread.

(You may include additional sheets/file with this form in support of your response below.)

Four horizontal lines for providing a response to the previous question.

Departmental Approval _____
Department Head Date

Academic Dean Approval _____
Dean Date