



Request for Travel Supplemental Information

RM/EHS requests the following information as a supplement to the Request for Travel form. The information provided herein will be used to transmit to our insurer for contingent emergency use.

GENERAL INFORMATION		
Destination of Travel (Please include city(s), province, region, state and country)*:		
Date(s): From:	To:	Number of Individuals Traveling:
Name of Employee(s) Traveling:		
Name of Student(s) Traveling:		
Name of Other Participant(s) Traveling:		
Please describe Other Participant(s) (e.g. spouse, dependent), if any:		
Are any of the visiting country(s) on the high hazard/travel warning list, or a "war-risk" country?	Yes	No
If yes, have you received approval from the appropriate Cal State LA division vice president?	Yes	No
If yes, please provide the following:		
1. Contact information for traveler(s) while traveling to high hazardous country(s).		
2. Contact information of where traveler(s) will be staying while in high hazardous country(s).		
3. How the traveler(s) will be traveling from where s/he is staying and where s/he will be conducting university business while in high hazardous country(s).		
4. The airport the traveler(s) will be traveling to in the high hazardous country(s).		
5. Any additional security measures in place while traveling to high hazardous country(s).		
Questions or Special issues:		

*Please provide a copy of the itinerary.