

Independent Student Travel while on a Faculty led Study Abroad Program

If you are traveling independently and will be away from the program site for *any extended* period of time you must complete this document.

Name _____ Int'l phone number _____

Dates you will be away from the program site _____

Time you anticipate returning to the program site (or homestay, hotel, hostel) _____
From To

Locations you will be visiting _____

Addresses where you will be staying (if known), hotels, hostels etc. _____

Names of people who are traveling with you _____

Activities you will be engaged in

I certify that the information I have given above is an accurate description of my time away from the program.

Signature _____ Date _____

Print name _____