

PROCEDURES FOR TEMPLE UNIVERSITY STUDENTS TRAVELLING INTERNATIONALLY ON TEMPLE UNIVERSITY ORGANIZED, SANCTIONED OR FUNDED ACTIVITIES

So that Temple University can assist in the event of an emergency or crisis abroad, **all** Temple students travelling outside of the U.S. for activities that are organized, sanctioned and/or funded by Temple University are required to take the following steps before departure.

Please note that official university programs/activity are prohibited in countries that are under United States Department of State travel warnings; a complete listing can be found here: <https://travel.state.gov/content/passports/en/alertswarnings.html> and/or countries rated as high or extreme travel risk by [International SOS](#).

1. Travel Registration

Register your trip in the Temple University Travel Registry (TUTR) at <http://tutr.temple.edu>. Once logged in, choose 'create individual trip'. You will need the following to complete the registration:

- Name, personal and contact information, and passport number
- The name and contact information of your personal emergency contacts
- The name and U.S. contact information of your Program Sponsor, which is your study abroad provider or the Temple University department sponsoring your travel abroad
- The name and overseas contact information for your Program Sponsor or a person overseas Temple University can contact to locate or assist you in the event of an emergency
- Your flight itinerary to and from the U.S.
- The name, address, and contact information of your overseas accommodations

2. Student Forms

Complete the forms listed below and submit a copy of each to Education Abroad and Overseas Campuses at least one month prior to departure.

- Temple University Assumption of Risk and Release Form
- Health Information Form

Note: if you are participating in an academic program and require accommodations for a disability while overseas, please discuss the availability of any necessary accommodations with the Office of Disability Resources and Services.

3. GeoBlue Health Insurance

All students traveling internationally on Temple University organized, sanctioned or funded activities are required to purchase GeoBlue Health Insurance for the duration of their time outside of the U.S. GeoBlue is a comprehensive program of insurance benefits and services that covers 100% of medically necessary doctor's visits and emergency care overseas, including those dealing with pre-existing conditions.

To enroll in GeoBlue, you will need your TUID number and credit card. Complete the following steps:

1. Navigate to www.GeoBlueStudents.com/
2. Go to the column on the right that says **Enroll in your school or organization's group plan**.
3. Enter our group access code **HPW-22868**, click submit and continue through enrollment process.
4. Provide the participant enrollment information.
5. The cost is about \$23 for two weeks and it will be automatically calculated when you enter your trip dates.

Please see <https://tutr.temple.edu/lhth.aspx> for more information about how to use GeoBlue and to download the Description of Benefits for the full policy of benefits and exclusions. You must submit a copy of your receipt verifying enrollment to Education Abroad and Overseas Campuses.

4. State Department Country-Specific Information

<https://travel.state.gov/content/passports/en/country.html>

Review the Country-Specific information sheet for your destination(s) to familiarize yourself with:

- a. Passport/visa requirements
- b. Necessary immunizations
- c. Safety and security information, including local laws
- d. Location and contact information for U.S. embassies and consulates

In addition, you can review any worldwide cautions that may be in effect on the State Department's website.

5. International SOS

https://www.internationalosos.com/Members_Home/login/clientaccess.cfm?custno=11BSGC000017

All faculty, staff, and full-time students traveling abroad for research, study abroad, or University-approved programs are covered by International SOS, a 24-hour travel assistance program. ISOS membership is provided by Temple University and is administered by ISOS. This medical and security assistance program provides emergency response, as well as online services and travel information.

Visit the link above to review the full program description and download a member ID card. Travelers may also sign up for email alerts specific to their travel destination(s) on SOS's website.

6. Pre-Departure Checklist

Register individual trip in TUTOR

Submit Risk and Release and Health form to Education Abroad

Review GeoBlue information

Enroll in GeoBlue and submit receipt to Education Abroad

Review State Department Country-specific information sheet(s) and Worldwide Caution

Review International SOS benefits and download member ID card

Contact

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**TEMPLE UNIVERSITY
OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION
TRAVEL ABROAD PROGRAM**

ASSUMPTION OF RISK AND RELEASE FORM

Please return this form, completed and signed to: Temple University, Education Abroad Programs, 200 Tuttleman Learning Center, 1809 N. 13th St., Philadelphia, PA 19122, **at least one month prior to departure.**

Name of Applicant _____ Age _____ Birthdate _____

(month/day/year)

If applicant is under 18 years of age, a parent or legal guardian must also read and sign this form.

Permanent Address _____ Phone _____

International Destination, Start/End Dates, Temple Purpose of Travel _____

Name, Department and email address of Temple staff/faculty/student organization leader aware of your International Travel through Temple _____

I. Personal and Academic Conduct

I expressly acknowledge the right of Temple University to require the immediate withdrawal at any time of my participation in programs abroad approved by Temple University (“the Program”) if I fail to meet the University’s standard of scholarship and character and/or my actions or general behavior, in the sole discretion of the University, are determined to interfere with or disrupt the conduct of classes or any other activity of the program. I understand that I am subject to Temple University’s Student Conduct Code (http://policies.temple.edu/getdoc.asp?policy_no=03.70.12) while on a study abroad program.

II. Notification of Withdrawal

I agree to notify Temple University in writing should I choose to withdraw from the Program. My eligibility for refunds will be governed by the Fee Payment and Refund Policies (posted on pre-departure web site).

III. University’s Right to Change Program

I understand that although the University will attempt to maintain the Program as described in its publications and brochures, it reserves the right to change or cancel the Program, including the itinerary, travel arrangements, or accommodations, at any time and for any reason, with or without notice, and that neither the University, nor its trustees, employees, agents, subsidiaries or affiliates, shall be responsible or liable for any expenses or losses that I may sustain because of these changes.

IV. Acknowledgment

I understand and acknowledge that despite the most careful planning and supervision, serious injuries may occur during any travel and that during my travel I may sustain mortal or serious personal injuries, property damage or severe economic or other loss as a consequence of not only my own actions, inactions or negligence, but the actions, inactions or negligence of others. I am aware of the possible dangers and difficulties of travel including, but not limited to, those dangers and difficulties caused by inclement weather conditions, conditions of equipment used, sanitation, political unrest, crime, and differences in international laws. Furthermore, I am aware of the possible risks in receiving medical care and/or the lack of medical resources in a foreign country and that there may be other risks not known to me or not reasonably foreseeable at this time. I understand that I will receive from the Program information about the country and/or region I am going to, including U.S. State Department country specific information sheets issued to date which might contain information about inherent dangers and difficulties specific to the country or region I am going to, and I will familiarize myself with this information.

V. Acceptance of Risk and Release

I agree in consideration for being permitted to participate in the Program, on behalf of myself and my family, heirs, and personal representative(s), to assume all the risks and responsibilities surrounding my application to or participation in the Program. I hereby release and indemnify Temple University, its trustees, employees, agents, subsidiaries or affiliates from and against any present or future claim, loss of liability for injury to person or property which I may suffer (including death), or for which I may be liable to any other person, which may arise as a result of my application to or participation in the Program (including periods in transit to or from any country where the Program is being conducted and any field trips that occur in the Program).

VI. Health and Accident Insurance

I specifically agree and understand that Temple University does not provide any form of health, accident or liability insurance in connection with the study abroad program. I understand that I am required to have health insurance and that all such insurance is my sole responsibility. No costs for such insurance premiums will be reimbursed by Temple University. I recognize that the University is not obligated to satisfy any of my medical or medication needs, and I assume all risk and responsibility for such medical care. If I require medical treatment or hospital care in a foreign country or in the United States during the Program, Temple University, its trustees, employees, agents, subsidiaries or affiliates, will not be responsible for the cost or quality of such treatment or care.

VII. Other Legal Issues

I have carefully read this Assumption of Risk and Release Form before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement represents my complete understanding with the University concerning the University's responsibility and liability for my participation in the Program, supersedes any previous or contemporaneous understandings I may have had with the University on this subject, whether written or oral, and cannot be changed or amended in any way without my and the University's written concurrence.

I understand and agree that Temple University and the Program may share academic and student conduct related information regarding the Program among themselves and with my home school.

I represent that my agreement to the provisions herein is wholly voluntary and further understand that, prior to signing this Assumption of Risk and Release Form, I may consult with the advisor, counselor, or attorney of my choice.

I agree that, should any provision or aspect of this agreement be found to be unenforceable, that all the remaining provisions of the agreement will remain in full force and effect.

I agree that, should there be any dispute concerning my participation in the Program that would require the adjudication of a court of law such adjudication will occur in the courts of, and will be determined by the laws of, the Commonwealth of Pennsylvania, without regard to its choice of law doctrine.

Name of Applicant _____

Signature of Applicant _____ **Date** _____

If you are under 18 years of age a parent or legal guardian must understand and sign the section below:

I (A) am the parent or legal guardian of the above Applicant, (B) have read the foregoing Assumption of Risk and Release Form, (C) am and will be legally responsible for the obligations and acts of the Applicant as described in this form, and (D) agree, for myself and for the Applicant, to be bound by its terms.

Name of Parent/Guardian _____

Signature of Parent/Guardian _____ **Date** _____

**Temple University
Education Abroad
HEALTH INFORMATION**

This form is to be completed by the participant and returned one month **before departure**.

NAME _____

BIRTH DATE ___/___/___ GENDER _____

PROGRAM/CONTACT
at TEMPLE _____

TRAVEL
DATES _____

The purpose of this form is to help Education Abroad be of maximum assistance to you should the need arise during your study abroad experience. Mild physical or psychological disorders can become serious under the stresses of life while studying abroad and away from regular support systems. It is important that the program is made aware of any health or medical condition, past or current, which might affect you in a foreign study context. A health or medical condition includes psychological and emotional conditions, as well as medical conditions, that require medication and/or maintenance of another sort. The information provided will remain confidential and will only be shared with the program staff, faculty, or appropriate professionals in order that appropriate support is available to you, should you require it. This information does not affect your admission into the program.

MEDICAL HISTORY

Yes ___ No ___ 1. Do you have any medical conditions (including allergies) that would be helpful for the program to be aware of? (If yes, please explain.)

Yes ___ No ___ 2. Have you ever been treated or are you currently being treated for any physical, psychological or emotional problems that would be helpful for the program to be aware of? (If yes, please explain.)

Yes ___ No ___ 3. Are you taking any medications? (If yes, please list. Give brand and generic name, if known.)

I certify that all responses made on this Health Information form are true and accurate, and I will notify the Education Abroad Office hereafter of any relevant changes in my health that occur prior to the start of the program.

Signature of Participant _____ Date _____