

## **Independent Travel Form**

| Faculty Coordinator:  | Program:                                 |   |
|---|--|---|
| For health and safety reasons, it is cryour own during a study abroad prog<br>Independent Travel Form below. Plea<br>your trip. | gram's "free day(s)/weekend." Stud       | •                                       |
| Date:   | A #:                                     |   |
| Name:   | Phone #:                                 |   |
| Email:  |  |   |
| Names of Anyone Traveling With Yo   | u:                                       |   |
| Travel Destinations, Dates, and Mod   | le(s) of Transportation (i.e. train, l   | bus, airplane, etc.)                    |
| Destinations  | Dates                                    | Mode of Transportation                  |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
| Train/flight/Bus Information:   |  |   |
| Hotel/Hostel/Host Contact Informat<br>Name, address, city, dates of stay, phone<br>we can reach you in the event of an eme      | e numbers. If staying with a friend, ple | ease list a name and phone number where |
| Comments/Additional Information (   | use back if necessary):                  |   |
| Print Name  | Faculty Signature                        | Date                                    |
| Print Name  | Student Signature                        | Date                                    |