

**WMU International Essential Travel Waiver
Form**

March 11, 2020 WMU suspended all non-essential travel. That suspension of university-sponsored international travel is extended indefinitely. Submission of this form requests a waiver for essential international travel only and is NOT required for travel within the United States.

- The WMU International Essential Travel Waiver Form must be submitted at least ten days prior to the date travel starts for any trip.
- US travel does not require a waiver and should proceed through the PeopleSoft approval system..
- Travel must be consistent with the US Dept. of State and CDC guidance and avoid high risk areas.
<https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>
<https://travel.state.gov/content/travel/en/traveladvisories/ea/covid-19-information.html>
<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/>
- All persons should talk to their healthcare providers before traveling internationally.
- All persons arriving on campus from international locations should practice enhanced social distancing during the 10 days before arriving on campus as described in the guidelines.
- International travel on an externally funded grant or contract must be approved by the VP for Research and Innovation. Travel waivers for research purposes will only be considered if a WMU Research Restart Request has also been filled. Both must be approved for research travel to occur.
- All other travel waiver inquiries should be submitted to your department Vice President or President.
- Traveler must still complete the WMU daily survey (https://healthmanager.wmich.edu/login_dualauthentication.aspx) while traveling.

Complete and submit to the appropriate VP.

Name: _____ Department: _____

College/VP unit: _____ Email: _____

Dates and destination of travel: _____

Funding account for travel: _____

Why is travel essential at this time?

What safety procedures will be followed? If 2 or more people are traveling together what is the distancing plan?

Document how this request is consistent with US Dept of State and CDC recommendation and what is the travel alert level for the country of destination (or origin if returning to the US).

Signature of Traveler

Date

Signature of Faculty Mentor/Staff Advisor for Students

Date

APPROVAL:

Print Name: Provost/VP (no exceptions)

Signature of Provost/VP (no exceptions)

Date