Please refer to the [travel policy](http://policies.griffith.edu.au/pdf/Travel%20Policy.pdf?_gl=1*5lmjqz*_ga*MjM0MDQyMDUyLjE2MzkwOTMxODA.*_ga_5GKYJEBSN9*MTY0OTU1MDc5MC4xMTIuMS4xNjQ5NTUxNzQ0LjA.) and the [Travel Page](https://intranet.secure.griffith.edu.au/travel) on Griffith’s intranet for further details

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| **Traveler's Details** |  |
| **Full Name:** \* Full Name and Travel Profile must match passport\*  | Click or tap here to enter text. |
| **Organisational Area:** | Click or tap here to enter text. |
| **S Number:** | Click or tap here to enter text. |
| **Reason for Travel:** | Click or tap here to enter text. |
| **Contact Details while Traveling:** | Click or tap here to enter text. |
| **Travel Dates [If you require more rows, please use the table provided on page 5]** |
| **Proposed travel dates, destinations, and activity / purpose of travel**  |
| **Date from** | **Date to** | **Destination** (Incl stop-overs) | **Purpose / Activity incl duration**(e.g. Name of Conference, Field Work) |
| Click here to enter date. | Click here to enter date. | Click or tap here to enter text. | Click or tap here to enter text. |
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| Click here to enter date. | Click here to enter date. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Total workdays absent (incl. any partial days):** |       | **Return to work date:** |       |
| **Total recreational leave applied for (including any partial days):** |       |
| **Travel Diary Requirements** |
| You have to complete a travel diary for either of the following situations:* If you undertake international travel for more than five consecutive nights; or
* If you undertake domestic travel for more than five nights for work and leisure purposes (dual purpose)
 |
| Are you required to complete and submit a travel diary: | [ ]  **Yes** | [ ]  **No** |
| **Travel Diary Endorsement Upon Return** |
| The table of activity/purpose above can be used as a travel diary if it is endorsed by the travelling employee upon return of the trip. Please sign and date in the space provided below and submit this form to: traveldiaries@griffith.edu.au |
| **Travelling Employee's Signature:** |  | **Date (must be after return date):** | Click here to enter date. |
| **Travel Requirements** |
| **Confirm all travel requirements have been met, that are required by the destination country/s. Please also refer to** [**https://www.smartraveller.gov.au/COVID-19**](https://www.smartraveller.gov.au/COVID-19) **for up-to-date information, including COVID-19.** |
| Have you reviewed the travel requirements for the destination country/s including vaccination requirements? | [ ]  **Yes** | [ ]  **No** |
| **Health and Safety (incl Insurance & Risk)** |
| **Review your travel destination on the** [**DFAT website**](https://www.smartraveller.gov.au/destinations?title=Greece&field_overall_advice_level_target_id=All) **and select the relevant Advice Level for your destination country/s.** |
| **Advice Level** | **Destination/s**  | **Action Required** |
| [x]  **Level 4** Do Not Travel[ ]  **Level 3** Reconsider your need to travel[ ]  **Level 2** Exercise a High Degree of Caution[ ]  **Level 1** Exercise a Normal Safety Precautions | Click or tap here to enter text.  | As per the Travel Policy, travel will not be approved to areas under current Department of Foreign Affairs and Trade (DFAT) warnings, **'Do not travel'** or '**Reconsider your need to travel**' or if insurance cover is not available, unless specific approval is provided by the Vice Chancellor or Deputy Vice Chancellor (Research) for academic staff and students or the Chief Operating Officer for professional staff. |
| **Corporate Travel Insurance**All Employees, Council and Committee Members, visiting Lecturers and Faculty staff and other approved overseas visitors of the University including their Accompanying Spouses/Partners are covered under Griffith University's **Corporate Travel Insurance** policy for business related travel. **Further information regarding Insurance can be found** [**here**](https://intranet.secure.griffith.edu.au/audit-insurance-risk-compliance/insurance)**.** Cover does not apply for any travel where a DFAT Level 4 DO NOT TRAVEL warning is in place, approval must be authorised by the COO or Provost as per the Travel Policy.  |
| **Private Travel Insurance**The current private component of the university corporate travel insurance policy includes up to five (5) days private incidental travel (but must not exceed more than 60% of the trip in its entirety). Personal insurance cover is strongly recommended for any non-University business travel in excess of five (5) days.Private insurance for domestic and international travel is available to staff, students, and their relatives from Chubb Insurance Australia Limited. Call between 8.30 am – 5 pm, Monday – Friday 1800 803 548 |
| **Assistance ISOS**All international travel must be booked through Serko or directly with CTM to ensure you are covered by ISOS. Griffith University subscribes to the services from International SOS, a leading medical assistance, international healthcare and security assistance company. To obtain specific information on your destination - including local risk factors, Emergency contact numbers, phone information, voltage and plugs, financial, cultural tips, Embassies and visas, Country facts [click here](https://www.internationalsos.com/MasterPortal/default.aspx?membnum=12AYCA000069). Before travelling it is highly recommended that you print a copy of the International SOS [member card](https://www.internationalsos.com/Private/NET_StandardMembershipCards/comprehensive.aspx?CustomerNumber=12AYCA000069&CompanyID=Griffith+University&ProgramName=Comprehensive+Access+Membership&PhoneNum1=Philadelphia+++%2b1+215+942+8226&PhoneNum2=London+++%2b44+(0)20+8762+8008&PhoneNum3=Singapore+++%2b65+6338+7800&PhoneNum4=Sydney+++%2b61+2+9372+2468&Language=en-US) and the app.  |
| Have you completed an appropriate [Risk Assessment](https://www.griffith.edu.au/health-safety-wellbeing/risk-management) for this travel and are you satisfied that travel is still appropriate? (clone GSafe Risk Assessment Ref No: 10101) | [ ]  **Yes**Click here to enter GSafe No.. |
| I declare I am fit to undertake this travel | [ ]  **Yes** |
| **Aviation Emissions** |
| Griffith University has committed to reducing unnecessary emissions from air travel by 25% by 2030. To help achieve that goal, have you considered the following:• Could other activities be included in this trip to avoid other potential trips at a later date?• Could you travel in a lower class fare to reduce your carbon impact?• Have alternative engagement modes been considered, e.g. virtual research, conferences or networking opportunities? |
| Have you considered the above to help reduce emissions?  | [ ]  **Yes** | [ ]  **No** |
| **Account Details** |
| Confirmation of how the travel is being funded, including the cost of testing and any required quarantine or isolation costs. Confirmation as to how any additional costs will be covered if you are required to lockdown or quarantine due to a change in restrictions or if you or a close contact develops COVID (and those costs aren't covered by insurance). You may also include details as to your eligibility for reciprocal healthcare and information or any other ways that you may be able to mitigate the risks to your health or the financial risks to the University, family or other support at the destination. |
| **Project Grant Description** | **Speed Type** | **Class** | **Account** |
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| **Account Details [Cont’d]** |
| Is any portion of the overseas travel being costed against an external grant? | [ ]  **Yes** [ ]  **No** | If "Yes", Traveler’s signature below is a declaration that all external grant travel guidelines have been met. |
| Is the travel being funded by an International organisation? | [ ]  **Yes** [ ]  **No** | If yes, Executive Group Approval is required. Please provide details of the funding organisation:Click or tap here to enter text. |

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| **Traveler’s Signature** |
| **Name** |  |
| **Signature** |  |
| **Date** |  |
| **Financial Delegate’s Approval** |
| **Name & Title** |  |
| **Signature** |  |
| **Date** |  |
| **Head of Element Approval [Head of School, Director or Equivalent]** |
| **Name & Title** |  |
| **Signature** |  |
| **Date** |  |
| **Executive Group Approval [Where applicable]** |
| **Name & Title** | Choose an item. |
| **Signature** |  |
| **Date** |  |

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| **Additional Rows for Travel Dates** |
| **Date from** | **Date to** | **Destination** (Incl stop-overs) | **Purpose / Activity incl duration**(e.g. Name of Conference, Field Work) |
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