

## USF Health- Student Individual Travel Approval Form

This document is an internal USF Health form to be electronically completed (not filled out by hand) for any USF Health student traveling on non-vacation, international individual travel. This form should be submitted via email to be reviewed prior to signatures by the student, faculty advisor/department chair, and College's Global Representative and the USF Health International Office (UHI).

**Please submit the completed and unsigned form to [healthglobal@usf.edu](mailto:healthglobal@usf.edu) Signatures on this document does not constitute final travel approval.**

<b>USF Health Student Traveler Information</b>	
Student Name:	
Student U#:	
Student Phone Number:	
Student USF Email:	
College, degree program, student level:	<input type="checkbox"/> MCOM <input type="checkbox"/> CON <input type="checkbox"/> TCOP <input type="checkbox"/> COPH Degree program: _____ Year/level: _____
Name of scholarly concentration:	
Faculty Advisor Name:	
<b>Proposed International Program Information</b>	
Program Location: (city/country)	
Host/Partner Institution Name(s) and Location(s):	
Program Term:	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer
Program Start and End Date: (MM/DD/YYYY)	
Program Type: (check all that apply)	<input type="checkbox"/> Community Service Project <input type="checkbox"/> Clinical Elective/Observership <input type="checkbox"/> Research <input type="checkbox"/> Field Experience <input type="checkbox"/> Conference/Seminar <input type="checkbox"/> Independent Study <input type="checkbox"/> Other (Please explain): _____



<p>College's International programs office:</p> <ul style="list-style-type: none"> <li>• College of Medicine: Jesse Casanova, <a href="mailto:jcasanov@usf.edu">jcasanov@usf.edu</a></li> <li>• Physician Assistant Program: Dr. Todd Wills, <a href="mailto:twills@usf.edu">twills@usf.edu</a></li> <li>• College of Nursing: Dr. Cheedy Jaja, <a href="mailto:cheedyj@usf.edu">cheedyj@usf.edu</a></li> <li>• College of Public Health: Dr. Somer Burke, <a href="mailto:sgoad@usf.edu">sgoad@usf.edu</a></li> <li>• College of Pharmacy: Dr. John Clark, <a href="mailto:jclark9@usf.edu">jclark9@usf.edu</a></li> </ul>			
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**FOR INTERNAL USE ONLY:**

<b>Final Approval by:</b>	<b>Name</b>	<b>Signature</b>	<b>Date</b>
Assistant Vice President, International, USF Health Assistant Dean, USF Medicine International Professor of Medicine	Lynette Menezes, PhD		
<p><b><i>for clinical experiences only- Acknowledged by:</i></b></p>			
USF Self-Insurance Program Director**	Courtney Rice, Esq.		