ACKNOWLEDGMENT AND ACCEPTANCE OF RISK FOR TRAVEL TO A CDC WARNING LEVEL 3 DESTINATION

1. The travel under this request was determined to be essential to the University by the Dean or Vice President.


3. I acknowledge that the CDC has issued a Level 3 Travel Warning for my destination. I acknowledge that my participation in this travel may expose me to significant risks and I am responsible for complying with necessary safety precautions related to my essential travel.

4. I understand that conditions in my destination may change rapidly, and I will stay informed of current events by obtaining updated security and health information from and enrolling in DOS’s Smart Traveler Enrollment Program (STEP) at https://step.state.gov/step/.

5. I will comply with all UA, local, state, and national travel guidance relevant to my host destination(s), the destination(s) through which I transit, and upon return to the United States.

6. I understand that because conditions in my destination may change rapidly, I may be required to leave my destination before completing the business purpose. I agree to make arrangements as soon as possible to return to the United States if UA recalls me. I further understand that the insurance UA has purchased for me currently only covers medical evacuation, political evacuation and natural disaster, and I understand there is currently no coverage to pay for an emergency evacuation flight based on the spread of a disease or pandemic. Finally, I understand that I may not be able to secure return travel for a significant amount of time.

Name (Please Print): __________________________________________

Signature: ____________________________________________ Date: _____________________