

# Foreign Travel Insurance Program (FTIP) Request for Insurance

## Traveler Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Emergency Contact (U.S.): \_\_\_\_\_ Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Emergency Contact (Abroad): \_\_\_\_\_ Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Traveler Status (check one): SDSU Employee<sup>1</sup> SDSURF Employee<sup>2</sup> Student<sup>3</sup> (Student Red ID: \_\_\_\_\_)  
Name of Immediate Family Member(s) Needing Coverage (traveler to pay): \_\_\_\_\_

## Travel Information

Travel Destination(s), include Country, City, Region: \_\_\_\_\_  
Is destination on the **U.S. Department of State Travel Warning List?** Yes No  
Is destination on the **CSU High Hazardous Country List?** Yes No **CSU War Risk List?** Yes No  
Departure Date from United States: \_\_\_\_\_ Return Date to United States: \_\_\_\_\_  
Purpose of Travel: \_\_\_\_\_  
Describe Any High Risk Activities (i.e., scuba diving, rock climbing, surfing): \_\_\_\_\_  
Traveler Enrolled in **U.S. Department of State Smart Traveler Enrollment Program (STEP)?** Yes No

## Trip Details

Transportation To / From International Destination: Air Motor Vehicle Ship / Boat Other  
If Air, airport(s): \_\_\_\_\_ If Other, specify: \_\_\_\_\_  
If Motor Vehicle, type: Personal Car Rental Car Hired Car Bus

### Lodging:

Hotel / Facility Name: \_\_\_\_\_ Hotel / Facility Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Transportation To / From Lodging: \_\_\_\_\_

### Site Visit Details (if applicable):

Location: \_\_\_\_\_ Address: \_\_\_\_\_  
Point of Contact Name: \_\_\_\_\_ Point of Contact Phone Number: \_\_\_\_\_

### Faculty-led / Group Trip:

Primary SDSU Contact: \_\_\_\_\_ SDSU Contact Phone Number: \_\_\_\_\_

Traveling with Students: Yes No

If Yes, please contact Office of International Programs at 594-1354 for further instructions. FTIP insurance is also required for students.

## Travel Approval

San Diego State University President or Designee

Date

Chancellor's Office (War Risk destinations only)

Date

<sup>1</sup>SDSU Employees (including student employees): forward form with T2 for approval. Please contact Nancy Demich at 594-5937 if questions about the Foreign Travel Insurance Program.

<sup>2</sup>SDSU Research Foundation Employees and Students on Grants: forward form to riskmanagement@foundation.sdsu.edu or send to Mary Manesis (MC-1945 or fax 594-2363).

<sup>3</sup>SDSU Students: please contact Office of International Programs at 594-1354.