**Policy on Study Abroad in Sites under a State Department or Center for Disease Control Travel Warning**

Loyola University New Orleans sets guidelines about how, when and where students may study abroad and considers issues of terrorism, war, disease and other risks to travelers. Accordingly, the University observes the following policy:

If the US Department of State or the Centers for Disease Control issue a travel warning for a particular country or region within a country, Loyola will suspend approval of any program or individual study abroad by Loyola students in that country as long as the warning is in effect, unless an application for a waiver of that policy is approved.

When a travel warning is issued, one of the following applications/requests will be required:

1. For a faculty-led program, the director must submit a “Request for continuation of Loyola/Faculty-run program in country with a travel warning”,
2. For a student requesting approval of a non-Loyola program in a country with a Travel Warning, the student must complete the “Student Application for Waiver of Loyola policy on study in a country with a Travel Warning.”
3. For a non-faculty led Loyola study abroad or exchange program, CIE must submit a “Request for continuation of Loyola/Faculty-run program in country where there is a travel warning”,

Without approval of the application waiver, the university support is withdrawn and no academic credit will be awarded for programs in such countries nor will federal financial aid be granted for study in such locations.

**Procedure**

*For Faculty/CIE applications for Loyola programs*

1. **Timeline** - The application must be submitted to the Education Abroad Committee according to the following deadlines:
   a. For a program currently abroad - within one week of the issuance of a travel warning. An email should be sent to the students abroad with the travel warning and letting them know that the university is currently reviewing the warning and will notify the students of its decision of whether or not to cancel the program.
   b. For a program that is planned or being promoted - within 2 weeks of the issuance of the travel warning or as determined by Risk Management and CIE.
2. **Application** – A faculty director or CIE will submit application “Request for continuation of Loyola/Faculty-run program in country with a travel warning” and any supporting documentation.
3. **Review** - The Education Abroad Committee reviews the request and forwards their recommendation to the provost who will make the final decision.
4. **Provost decision**
   a. Approval - If the Provost approves the request then any student applying for that program must receive a copy of the travel warning along with the completed application. The student must sign off in the online application.
system that they have read the warning and the application. A copy of these documents should also be sent to the parents.

b. Cancellation – If the provost determines that a program should be cancelled or terminated due to an emergency or crisis situation, the faculty director or CIE will notify students.

5. Refunds and withdrawals
   a. If the provost determines that a program should be cancelled or terminated due to a travel warning, the process for notification and refunds will be determined by the Education Abroad Committee.
   b. If the provost determines that a program may continue in spite of the traveling warning, students may still choose to withdraw and any student choosing to withdraw from the program will receive a refund based on the following:
      i. Prior to the start of the program, students will be permitted to withdraw and every effort made to find an alternate program. Students shall be refunded any fees not previously spent or all fees???
      EAC – If Loyola decides to continue a program and a student decides to continue, should students receive all their money back or should they only receive fees not previously spent?
      ii. When students are abroad, the updated information must be distributed within 72 hours to students and students will be permitted to withdraw. Every effort will be made to allow students to complete their coursework after their return. Students shall be refunded any fees not already expended.

Student Application to study in a non-Loyola program where there is a travel warning
1. Timeline - All applications for fall and full year are due on March 1 and for spring on October 1.
2. Application – Student must submit the Student Application to study in a non-Loyola program where there is a travel warning to CIE along with any supporting documentation.
   a. if the student will be enrolling directly in a university abroad, the petition should also include information required by the petition for direct enrollment
   b. The student must still complete and receive academic approval for the specific program and courses by completing the Course Approval Form.
3. Review- The Education Abroad Committee reviews and decides whether or not to approve the student petition.
4. Notification – CIE will notify the student of the decision of the EAC.
   a. Approval – if the petition is approved, the student will receive academic credit as per the course approval form.
   b. Denial – if the petition is denied, and the student decides to study abroad, he/she will have to withdraw from the university and then reapply upon completion of the study abroad program. Acceptance of credits will be determined by Admissions.

For a list of countries with State Department Travel Warnings please check the State Department website.
For a list of countries with Center for Disease Control Travel Warnings, please check the CDC website.
Loyola University New Orleans
Center for International Education
Request for Continuation of Loyola/Faculty-run program in a Country with a Travel Warning

Instructions: Please complete all pages of this form (attaching additional pages, if necessary) and bring to the appropriate administrators for signatures. Submit all documentation, along with a letter of support, to the Education Abroad Committee within one week of the issuance of a travel warning or prior to advertising a program. *(at least 4 weeks in advance of proposed travel or if a travel warning is issued while a program is ongoing).*

Submit all required materials to Debbie Danna in the Center for International Education *(Emailed submissions preferred)*. *(danna@loyno.edu)*

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### Faculty Leader Details

Name: ___________________________  Title: ___________________  Department: ____________________________

E-Mail: __________________________  Phone: __________________________

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### Description of Program & Travel

Title of Program: ____________________________

Location (country and cities –*be specific*): ____________________________

Exact Dates of Proposed Travel: ____________________________

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### Required Signatures

Faculty Leader Signature: __________________________  Date: ________________

Academic Chair Signature: __________________________  Date: ________________

  Name: __________________________  Department: __________________________

  E-mail: __________________________  Phone: __________________________

Dean Signature: __________________________  Date: ________________

  Name: __________________________  Department: __________________________

  E-mail: __________________________  Phone: __________________________
Request for Continuation of Loyola/Faculty-run program in a Country with a Travel Warning

Faculty Leader’s Emergency Contact Information While Abroad (or on-site coordinator)

Please provide the appropriate information that Loyola and/or outside sources may use to communicate with you in the event of a crisis:

Traveler name as it appears on Passport: ________________________________________________________________

Phone number(s) where traveler can be reached internationally:

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

Physical Address of all accommodations while abroad: __________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

Will the faculty leader be onsite throughout the program? Yes_____ No _____ If no, please provide the contact information for the responsible person onsite under Partner University/Study Program contact.

Alternate Emergency Contact Information While Abroad

Please provide an alternate person that Loyola and/or outside sources may use to communicate with you in the event of a crisis:

Name: ___________________________________________ Relation to Traveler: _____________________________

Phone Numbers (cell/work/home):

___________________________________________________________________________________________

___________________________________________________________________________________________

Email: ______________________________________________________________________________________

Physical Address: __________________________________________________________________________

Partner University/Study Abroad Program Contact

If the program is an exchange or uses a 3rd party provider, please provide a contact for CIE to work with in the event of a crisis:

Name & Title: ___________________________________________ Department: _____________________________

Phone Numbers (cell/work/home):

___________________________________________________________________________________________

___________________________________________________________________________________________

Email: ______________________________________________________________________________________

Secondary Contact Person: ___________________________ Phone: _________________________________
ITINERARY

Please provide a complete itinerary of your travel, including all departure/arrival dates, airline flight #’s, locations, addresses and modes of transportation.
SAFETY & SECURITY ASSESSMENT

1. Contact Risk Management to obtain a country specific security rating and attach a copy to submit with your application. Please circle the appropriate security ration.

   - Insignificant
   - Low
   - Medium
   - High
   - Extreme

2. The US State Department website is [www.travel.state.gov](http://www.travel.state.gov) and lists country-specific Travel Warnings and Alerts for US citizens. Please summarize (do not copy/paste) the current State Department Travel Warning or Alert for your location.

3. Describe your level of familiarity with the proposed international location.

4. With regard to the current State Department Travel Warning or Alert and your own health/safety/security assessment of the proposed location, what risks might students encounter while traveling and/or at the proposed site? Please specifically address the housing of the students and transportation between their housing and study location.

5. What specific steps will you take to mitigate these risks? What is your emergency plan as it relates to natural disasters, civil/political unrest, and medical emergency related to accident or injury? Please be as specific and detailed as possible.

6. How will you inform students of the risks involved with travel to the proposed location? What information will you provide, and how will you educate the students on mitigating risk?

7. Why should the university approve this application to continue a program in a country where there is a travel warning?
All applications for fall and full year are due on March 15 and for spring on October 15.

I confirm that I have read and understood the U.S. State Department and/or Center for Disease Control Warning for ____________________________ dated __________________

and that, in spite of this warning and the University’s strong recommendations against travel to and in___________________________ at this time, I have made the decision to travel to ____________________________in ______________________ to study abroad.

I acknowledge that my participation in this program is voluntary. I furthermore acknowledge that the Loyola University New Orleans does not sponsor this program, nor is the University responsible for my safety while overseas. I know that I am not required to study in ________________ to complete any requirements at Loyola and I am aware of other study abroad options available to me.

I acknowledge that my travel may expose me to significant risks including, but not limited to, terrorism, war, serious bodily injury or death, property damage and other risks that my not be foreseeable.

I have read and signed this document with full knowledge of its significance. If I am not 18 years of age, the signature of my parent or legal guardian indicates full agreement with and acceptance of the terms of this release. If I am 18 years of age or older, the signature of my next-of-kin indicates full agreement with and acceptance of the terms of this release.

____________________________________  ______________
Student Signature                    Date

____________________________________
Printed Name of Student

____________________________________  ______________
Signature of Parent/Legal Guardian or Next of Kin    Date

____________________________________
Printed Name of Parent/Legal Guardian or Next of Kin
Relationship
Emergency Contact Information While Abroad

*Please provide the appropriate information that Loyola may use to communicate with you in the event of a crisis:*

Traveler name as it appears on Passport: ________________________________________________________________

Email: ____________________________________________________________________________________

Phone number(s) where traveler can be reached internationally:
___________________________________________________________________________________________

Physical Address of all accommodations while abroad: __________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Alternate Emergency Contact Information While Abroad

*Please provide an alternate person that Loyola and/or outside sources may use to communicate with you in the event of a crisis:*

Name: ____________________________________ Relation to Traveler: ________________________________

Phone Numbers (cell/work/home):
___________________________________________________________________________________________

Email: ____________________________________________________________________________________

Physical Address: ____________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Partner University/Study Abroad Program Contact

*If the program is an exchange or uses a 3rd party provider, please provide a contact for CIE to work with in the event of a crisis:*

Name & Title: ____________________________________________ Department: _____________________________

Phone Numbers (cell/work/home):
___________________________________________________________________________________________

Email: ____________________________________________________________________________________

Secondary Contact Person: ____________________________ Phone: _________________________________
SAFETY & SECURITY ASSESSMENT

1. The US State Department website is [www.travel.state.gov](http://www.travel.state.gov) and lists country-specific Travel Warnings and Alerts for US citizens. Please summarize (do not copy/paste) the current State Department Travel Warning or Alert for your location.

2. With regard to the current State Department Travel Warning or Alert and your own health/safety/security assessment of the proposed location, what risks might you encounter while at the proposed site?

3. Describe your level of familiarity with the proposed international location.

4. Please discuss the academic necessity and appropriateness of the proposed study abroad.

5. Please discuss your previous experience abroad or other relevant experience.

6. What specific steps will you take to mitigate these risks? Please be as specific and detailed as possible.

7. Please discuss the emergency preparedness and the health and safety procedures of the institution that you will be attending.

8. Why do you think the university should approve your application to study in a country where there is a travel warning?