## University of California, Merced International Travel Safety Plan

This form may be used by a Principal Investigator (PI) or Faculty Lead to assist with the development of a Safety Plan when leading research teams or student groups abroad. **The completed Safety Plan should be shared with all the members of the research team or group and kept on file at your campus department.** Multiple trips to the same location can be covered by a single Safety Plan. The Safety Plan should be revised whenever a significant change to the location or scope of fieldwork occurs. Risk Services is available to assist in completion or review of the Safety Plan <u>riskservices@ucmerced.edu</u>

1	<i></i>				
Principal Investigator:		Faculty Lead or Department:			
Phone Number:		E-mail Address:			
<b>Dates of Travel:</b> ( <i>Lis</i>	st multiple dates if more i	than one trip is planned.)			
(T. 1					
Location of Travel:  Country:					
Research Site (if applicable):					
Nearest City:					
(Name, Distance from Site)					
Nearest Hospital:(Location, Distance from Site)					
Purpose of Trip:					
1					
University Contact		Local (Field) Contact			
Name	Phone		Phone		
Emergency Procedu	ıres: (Include detailed 1	plans including evacuation	n and emergency communication.)		
Include a separate she	_	0	,		

First Aid Training: (List any team members who are trained in first aid and the type of training received.)				
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<b>Physical Demands:</b> (List any physical demands required for trip; e.g., diving, climbing, high altitude.)				
<b>Risk Assessment</b> : List identified risks associated with the activity or the physical environment (e.g.,				
extreme heat or cold, wild animals, endemic diseases, firearms, explosives, violence). List appropriate measures to be taken to reduce the risks. <i>Include a separate sheet if necessary</i> .				
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Identified Risk	Control of Kisk			
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10.				
Travel Immunizations: (List required immunizations/prophylaxis.)				
Traveler Names (List the names of those traveling.)				