

| SECTION A – GENERAL INFORMATION | | | | |
|--|---|--|--|---------------|
| Applicant Name (seeking funding) | | Traveller Name (if non-staff Guest) | | |
| School/Directorate | | | | |
| Purpose of travel | | Travel Destination (list main country) | | |
| Are you academic teaching staff? | Yes | No | Is sessional staff required to cover teaching? | Yes No |
| Are you an HDR student? | Yes | No | Has your Supervisor given provisional approval to proceed? | Yes No |
| PRELIMINARY DETERMINATIONS | | | | |
| Travel Calculator & Diary completed (mandatory) | | % of Private Days (% in red on Travel Calculator & Diary) % | | |
| Departure Date | Return Date | | Number of nights away from home | |
| SECTION B - JUSTIFICATION | | | | |
| Please state how this application aligns with your PRDP Key Objectives | | | | |
| Please state intended outcomes for the University from proposed funding | | | | |
| Submission date for Report On Outcomes (Academic only) | | | | |
| Submit to supervisor within one month of return, outlining the achievement of objective(s) & intended application. | | | | |
| SECTION C – TRAVEL BUDGET | | | | |
| EXPENSE | DETAILS | | | COST ESTIMATE |
| Airfares | Request, via email to FCM Travel, quote with visa cost (if required). NB. Your quote entered will be loaded by 10% to allow for price increase. | | | |
| Accommodation | Calculate expenses based on number of nights at destination(s) and include any hotel special rates (if) available from conference / event convener. | | | |
| Conference / Event fee | Attach copy of conference / event flyer to this application | | | |
| Meals | Refer ATO Reasonable Daily Allowance (as a guide only) Do not include meals included in conference / event registration. | | | |
| Incidentals | Laundry / tipping / parking etc | | | |
| Transit costs | Shuttle bus / taxis / train etc | | | |
| Teaching buy-out | If sessional staff are required to cover teaching please contact Coordinator, School Services to obtain costing. | | | |
| FUNDING SOURCE | | | | |
| Source | Dept / Project name | Department code | Project code | Amount |
| FedUni funds | | | | |
| FedUni funds | | | | |
| FedUni funds | | | | |
| Private / External funds | N/A | N/A | N/A | |
| NB. Airfare estimate has been loaded by 10% to allow for price increase | | | Total requested FedUni funds | |

SECTION D – DOCUMENT CHECKLIST

 For all attachments use the  icon in left hand toolbar to attach within this application BEFORE signing

| | |
|---|---|
| Completed Travel Calculator & Diary | Official conference presenter acceptance (if applic.) |
| (Fit for travel) Medical Certificate (if applic.) | |

SECTION E – RISK MANAGEMENT DECLARATION
PART 1 – FIT FOR TRAVEL

| | | | |
|---|-----|----|--|
| Do you have a pre-existing health condition, which may be impacted by you travelling? | Yes | No | If Yes, please obtain a medical certificate from your practitioner stating you are fit for travel? |
|---|-----|----|--|

PART 2 – SAFETY RISK ASSESSMENT

To ensure the safety of the University's travellers¹ the University must ensure that policy and procedures associated with safety and travel are followed. No travellers will be permitted to travel to/through a country/region rated by DFAT at Code Red (Do not travel). To complete the following please go to [Smartraveller](#) to verify current risk ratings.

| | | |
|---------|---------------|-------------|
| Country | City/Location | DFAT Rating |
| Country | City/Location | DFAT Rating |
| Country | City/Location | DFAT Rating |

THE FOLLOWING ASSESSMENT MUST BE COMPLETED BY UNIVERSITY TRAVELLERS WHEN APPLYING TO TRAVEL TO/THROUGH ANY COUNTRY RATED BY DFAT AT:

CODE YELLOW (EXERCISE A HIGH DEGREE OF CAUTION) **OR ORANGE** (RECONSIDER YOUR NEED FOR TRAVEL)

| | | | |
|-----|---|--------------------------------------|-----|
| 1. | Passport type | If Other, state passport nationality | |
| 2. | I will be using the following modes of transport | Train | Bus |
| 3. | I have completed my Emergency Contact details in my Concur profile. | Yes | No |
| 4. | I will have a mobile phone at all times and not be out of mobile coverage. | Yes | No* |
| 5. | I will be located at least 100kms beyond the identified points of risk. | Yes | No* |
| 6. | I have extensive in-country knowledge and experience. | Yes | No* |
| 7. | I have an awareness of the risks and have an evacuation plan if a critical incident / emergency should occur. Add details in Comments and Controls. | Yes | No* |
| 8. | I am able to speak the language in the countries or areas in which I will be travelling. | Yes | No |
| 9. | I have a local contact and/or guide in the countries or areas travelling. | Yes | No* |
| 10. | I will be avoiding public places, such as shopping centres, restaurant strips, markets, places of worship and other hotels. | Yes | No* |

COMMENTS & CONTROLS *What controls are in place and what actions will be taken for any item ticked 'No' above?

PART 3 – TRAVEL APPLICANT DECLARATION

| | |
|--|---------------------|
| I understand the current risks and conditions I will experience travelling to the listed destinations | Signed by applicant |
| I confirm I have read and will adhere to the Travel Policy & Procedure | |
| I confirm that if any of the above information changes I will immediately notify my approving delegate | |

Note 1: Travellers mean anyone who travels on pre-approved Federation Uni business irrespective of who is paying for the travel and includes staff (incl. sessional/casual), members of Council, students, consultants, contractors, accompanying spouse/dependents

SUBMIT APPLICATION TO YOUR DEAN / DIRECTOR / PVC / DVC

SECTION F – APPROVAL

PART 1 - PRELIMINARY CHECKS

Travel Calculator & Diary verified private days within acceptable limit (Refer attachment)

Has HDR Supervisor given provisional approval? (Refer Section A)

| Highest DFAT Risk Rating Verified As: | Code Green | Code Yellow | Code Orange | Code Red |
|---------------------------------------|--------------|--------------|--------------|--------------|
| | Go to Part 2 | Go to Part 2 | Go to Part 3 | NOT APPROVED |

PART 2 - DFAT CODE GREEN / YELLOW APPROVAL

| | |
|-----------------------------|---|
| Dean / Director / PVC / DVC | Travel Risk Assessment: Code Yellow Sufficient risk management strategies are in place |
| Yes | No |

| | | |
|----------|--------------|--|
| Approved | Not Approved | FedUni Funding Approved Amount |
|----------|--------------|--|

PART 3 - DFAT CODE ORANGE APPROVAL

| | |
|-----------------------------|---|
| Dean / Director / PVC / DVC | Accountant - Taxation, Treasury & Insurance has advised insurance coverage will be given for this travel? |
| Yes | No* |

| | | |
|------------------------|--------------|---|
| Provisionally Approved | Not Approved | FedUni Funding Approved Amount^ |
|------------------------|--------------|---|

| | |
|--------|---|
| DVC(A) | Travel Risk Assessment: Code Orange Sufficient risk management strategies are in place |
| Yes | No |

| | | |
|---------------|-------------------|--|
| Risk Approved | Risk Not Approved | |
|---------------|-------------------|--|

* If insurance coverage will not be given, travel should be NOT APPROVED
 ^ Funding amount only valid if Risk Approved.

SECTION G – TRAVEL CHECKLIST (TO BE COMPLETED AFTER APPROVAL BEFORE UPLOADING IN CONCUR)
PASSPORT & VISA (INTERNATIONAL ONLY)

| | |
|---|-------------------------|
| State your full name as identified on your passport | |
| Are you travelling on an Australian passport? If No, please state which country. | Yes No |
| List all countries to which you are travelling. | |
| Does your passport have 6-months validity from date of re-entry into Australia? | Yes No |

FLIGHTS & TRANSITS

| | |
|---|-------------------------|
| If you have researched specific flight times/carriers, please provide flight numbers and dates. | |
| Please list full name(s) of any additional travellers accompanying you, if applicable (for student cohorts please complete table below) | |
| Please state if you have a flight seating preference. | |
| If needing to be seated with colleague(s) please quote their Concur Request ID. | |
| Please state any dietary requirements for flights. | |
| Please state if you require an approximate arrival time at your destination. | |
| Do you require airport pickup at your destination? | Yes No |
| Will there be an excess baggage requirement? | Yes No |
| Do you require an airport shuttle bus booking (to/from Melbourne)? NB. Please contact your area's administration to arrange. | Yes No |
| Do you require car hire? NB. For security purposes charges will be applied to your personal credit card. | Yes No |

ACCOMMODATION

| | |
|---|--|
| Provide any key event venue address(s) to source convenient hotel locations. | |
| Please state if you have hotel room requirements? | |
| If special hotel rates are available for any event attendance where bookable direct with the hotel (not via conf. online registration), please list the hotel name, special rate and any booking codes. | |

EVENT REGISTRATION

| | |
|--|-------------------------|
| Do you require online payment to be made for event registration? If Yes, please contact your area's administration. | Yes No |
|--|-------------------------|

COMPLETE FOR STUDENT STUDY TOURS

| STUDENT NAME (FULL NAME) | STUDENT ID | STUDENT NAME (FULL NAME) | STUDENT ID |
|--------------------------|------------|--------------------------|------------|
| | | | |
| | | | |
| | | | |
| | | | |