

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