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**\*\*This form must be turned into your Department/Program along with a copy of the CISI insurance card or receipt/confirmation of payment prior to your departure for International Travel. This form must be completed each time you receive an OGSR Research Grant and/or GSA Conference Travel Grant.**

Student Name: \_\_\_\_\_

Student W&M ID#: \_\_\_\_\_

I hereby certify that I have read all the program materials, and I absolve the College of William and Mary and the local coordinating agency from all liability for injury, loss, damage, accident, delay, irregularity, or additional expense arising from the use of any vehicle or services, or from strikes, war, weather, quarantines, sickness, government restriction or regulations, or from any act of omission of any steamship, railroad, motor coach, car rental agency, airline, or other transportation company, or for any other cause whatsoever in connection with the College of William and Mary's educational program abroad. I understand that W&M does not accept responsibility in any way for the loss or damage to baggage or personal effects; I understand that it is my responsibility to ensure that I have appropriate insurance coverage for my personal property.

Travel Release: I hereby acknowledge that I will assume responsibility for my personal affairs and safety during periods of extended travel, weekend journeys and other activities or travel not directly related to the William and Mary overseas program. I understand that I will be responsible for informing the director of the program (where applicable) of any extended trips I am taking, indicating a brief itinerary of my travel plans.

In addition, I will purchase the required CISI Travel/Medical Insurance (<http://tinyurl.com/atj62cy>) coordinated through the Reves Center. Furthermore, I will become familiar with the resources available to me concerning International Travel from the US Department of State including but not limited to: [www.osac.gov](http://www.osac.gov), <http://travel.state.gov>, <http://studentsabroad.state.gov/>, and [www.cdc.gov](http://www.cdc.gov).

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_