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|---|---|---|
| <b>Name</b>   | <b>Department / Institution</b>                     | <b>Faculty, staff, student or volunteer</b> |
|   |   |   |
| <b>DESCRIPTION OF ACTIVITY (select applicable activity)</b> |   |   |
| <i>Research</i>   | <i>Conference</i>                                   | <i>Meeting</i>                              |
| <i>Placement</i>  | <i>Internship</i>                                   | <i>Other</i>                                |
| <b>Departure Date</b>                                       | <b>Date of Return to Canada</b>                     |   |
|   |   |   |
| <b>Country of Destination</b>                               | <b>Area of Country</b>                              |   |
|   |   |   |
|   | <b>Any current health advisory in this Country?</b> |   |
|   |   |   |
| <b>Host Institution/Program Name (if applicable)</b>        | <b>Host/ Program Contact Name</b>                   |   |
|   |   |   |
| <b>Host Contact Phone Number:</b>                           |   |   |
| <b>EMERGENCY CONTACT INFORMATION</b>                        |   |   |
| <b>Name:</b>  |   |   |
|   |   |   |
| <b>Address:</b>   |   |   |
|   |   |   |
| <b>Telephone: (h)</b>                                       | <b>Telephone: (w)</b>                               |   |
|   |   |   |
| <b>Email:</b>   |   |   |
|   |   |   |

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