

# Undergraduate Travel Request to Heightened Risk Region

## Letter of Support from Sponsoring Academic or Program Unit

**To be completed by student or trip leader:**

<b>Student/Trip Leader Name:</b>	<b>Penn ID:</b>
<b>Department/College:</b>	<b>Email:</b>
<b>Heightened Risk Region(s) to be visited:</b>	<b>Trip Start Date:</b> <b>Trip End Date:</b>
<b>Purpose of Travel:</b>	

**To be completed by faculty or administrator:**

Please provide a letter in support of this student or trip leader's proposed travel to a heightened risk region. The letter need not endorse the safety of the location but should explain the academic value of this trip and how the opportunity will positively impact the student's (or student group's) academic experience at Penn.

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<b>Signature:</b>	<b>Date:</b>
	
<b>Title:</b>	<b>Dept/College:</b>