

Overseas Travel & Risk Assessment Form (2)

Please email a soft copy to your line manager and get authorisations as appropriate.

- *If you are going to areas where your Foreign Ministry advises against travel, ensure you have adequate travel insurance*
- *If you choose to ignore current recommended vaccine and travel health advice for the countries which you are visiting, you will be travelling at your own risk*

Name & Department		Signature of traveller	
Country & Cities to be visited		Date	
Date of Departure/Return		Signature of Head of Dept	
Purpose of Visit		Name of Head of Dept	
		Date	

<ul style="list-style-type: none"> • Have you completed an itinerary document and send it to your manager? 	<p>Yes / No <i>please delete as applicable</i></p>
<ul style="list-style-type: none"> • Have you travelled to this country before? 	<p>Yes / No <i>please delete as applicable</i></p>
<ul style="list-style-type: none"> • Please specify if you have <u>extensive knowledge</u> of the country you are visiting (gained from residence, citizenship or work experience there) 	

What are the current risks identified by for the country being visited (use the INSI free websites)?

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What is the risk rating determined by other organisations

Category		Associated problems	Probability: Low, Medium, High, Extreme?	Measures taken to reduce risk
Crime		street crime, local scams, theft, hotel room security		
Terrorism		bombings, security alerts, terror attacks		
Conflict		localised tensions or fighting that could result in outbreak of hostilities		
Political		civil unrest , strikes, riots, political demonstrations, upcoming elections or significant events		
Kidnap		abduction/kidnapping		
Infrastructure	Transportation	airport collection, local driving standards, hazardous terrain, roadworthiness, safety belts		
	Medical capabilities	hospital proximity and standards, methods of payment for treatment, access to local doctor		
	Contaminated food	allergies, Hepatitis A, dysentery/diarrhoea, severe stomach upset		
	Contaminated water & drinking water	dysentery/diarrhoea, legionella, leptospirosis, polio, cholera, typhoid		
	Utilities	compatibility of equipment, voltage, safety standards, power cuts		
Natural Risks	Climate conditions	extreme heat or cold, high humidity, monsoon/storms, altitude		
	Natural disasters	typhoon, tornado, tsunamis, avalanche, earthquake, flood		
	Contact - with insects	bites/stings, Lyme's disease, malaria, yellow fever		

	Contact - with animals	allergies, asthma, bird flu, bites, dermatitis, rabies, stings		
Cultural Risks	Local Culture	customs, dress, religion, behaviour		
	Legal differences	local codes/guidance, local statute		
Hazardous activities	Activities	Skiing, white water rafting, bungee jumping, diving etc.		
	Hazardous substances/chemicals	available antidotes, transport requirements, spillage		
	Field work/research	permits to work, safe systems, tides/water conditions, medical back-up, remoteness of work site		
Cyber activities				

Your Department Contact

Please enter the number of your emergency contact person in your department here:

Name:
Ext. No.:

Embassy in-country

Please enter the number of your local Embassy in the country you are visiting

Emergency Numbers (put them in the order you want your manager to call them)

ITINERARY

Mobile number	phone being taken on trip/satphone	
Local contact	name, organisation and tel	
Travel bookings	please state whether booked online (and name website), through local contacts or through travel agent (please name)	

Date	Flight details	Hotel/Accommodation details
	Flight No: From/To: Departure time: Arrival time:	Name: Address: Tel:
	Flight No: From/To: Departure time: Arrival time:	Name: Address: Tel:
	Flight No: From/To: Departure time: Arrival time:	Name: Address: Tel:
	Flight No: From/To: Departure time: Arrival time:	Name: Address: Tel:
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