GI-TOC travel registration ANDtracking form

* This form must be completed for **VERY LOW**, **LOW** and **MEDIUM** trip risk levels and returned to your primary supervisor at least 1 week before travel.
* For **HIGH** and **VERY HIGH** trip risk levels, please use the Risk and contingency mission planner.

|  |  |
| --- | --- |
| Trip purpose: |  |

Travel itinerary

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Method of transport | Transport details | From | Dept. date and time | To | Arrival date and time |
|  | e.g., flight no. |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Accommodation details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| From (dd/mm/yy) | Until (dd/mm/yy) | City / Country | Accommodation Name | Address | Phone Number | Remarks |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Travel insurance details

|  |  |
| --- | --- |
| Insurance Name | GardaWorld Travel Security |
| Policy Number | 2000559 |
| Insurance 24/7 Emergency Contact | +41 22 819 44 66 support.travelsecurity@garda.com  |

Tether contact during trip

Please provide details of the tether (a trusted person who works for the GI-TOC) who will conduct your check-ins with you.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tether name | Tether role | Phone/mobile | Email | Time zone | Remark |
|  |  |  |  |  |  |

Emergency / home contact during trip

Please provide details of your emergency / home contact (e.g., your Next of kin, or a relative or friend) who the GI-TOC can contact in the event of an accident or incident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Home contact name | Relation to you | Phone/mobile | Email | Time zone | Remark |
|  |  |  |  |  |  |

Inclusive travel security

Please reference the inclusive travel security guidelines in the GI-TOC’s travel guidance and procedure and use the table below to identify any individual, organizational and contextual risks that could contribute to your increased exposure to risk.

|  |
| --- |
| Increased exposure factors |
| **1** |  | **6** |  |
| **2** |  | **7** |  |
| **3** |  | **8** |  |
| **5** |  | **9** |  |
| **6** |  | **10** |  |

We recognize that there may be circumstances where travellers do not wish to openly share their profile characteristics (for example, sexual orientation, gender identity or gender expression). As such, any traveller may escalate the trip risk level (without needing to provide a reason) to ensure that a higher level of travel guidelines is implemented. Conversely, managers can escalate the trip risk level if they feel there is an increased exposure to risk because of profile, activities or context.

Approve or decline

|  |
| --- |
| TRAVELLER |
| **Approve**Having gained adequate information on the risk involved in this trip, I understand the foreseeable risks to which I may be exposed to and agree to travel with this knowledge. I confirm that I have been provided the opportunity to discuss the travel and associated risk in detail and can meet the guidance outlined in the GI-TOC’s travel guidance and procedure. |
| Name |  | Position |  | Date |  |
| **Decline**Having received adequate information on the risk involved in this trip, I decline to travel. |
| Name |  | Position |  | Date |  |

|  |
| --- |
| APPROVER |
| **Approve**Having gained adequate information on the risk involved in this trip, I understand the foreseeable risks to which the traveller may be exposed to and agree to approve with this knowledge. I confirm that I have been provided the opportunity to discuss the travel and associated risk in detail. |
| Name |  | Position |  | Date |  |
| **Decline**Having gained adequate information on the risk involved in this trip, I decline to approve the trip. |
| Reason |  |
| Name |  | Position |  | Date |  |