



TRAVEL PACKET INSTRUCTIONS

As a student in the Diocese of Davenport International Program there are certain rules and regulations to follow when a student wants to travel domestic or internationally.

It is the responsibility of the student, with the help of the school advisor, to complete and submit the proper forms 2 weeks prior to travel. This has to be approved by the Diocese of Davenport PDSO prior to the student/family booking flights or making travel arrangements.

To ensure the safety of our students we require the following documents to be completed and it is our responsibility to know where the student is while on the I-20 with our program.

Rules:

1. A student can travel within the United States with their approved current host family or natural parents without filling out these forms.
2. A student cannot travel alone within the United States without the proper permissions and approval. The "Natural Parent Travel Release", "Overnight Trip without Host Parents" and "Travel Proposal Form" would need to be completed and sent to our office 2 weeks prior to the travel proposed.
3. If a student is going on an overnight trip without the host parents, we require the accompanied adult to be a minimum of 25 years old, contact information is provided, and the host parent/program coordinator has spoken to this person to verify the information.
4. If a student is going on a school/parish trip or school/parish function outside of the state or internationally, these forms do not need to be completed. It is recommended the PDSO is given the dates a student will be not be with the host family.
5. The student should not stay in a hotel/motel room alone without the proper chaperone.
6. All host families the student lives with for the duration of the school year(s) are required to complete the Safe Environment Program and complete a background check.
7. If any school time is missed, assignments need to be completed per the school regulations.

Failure to complete the proper forms or travel without the proper permissions can result in termination of your I-20/F1 status.



TRAVEL PROPOSAL FORM

It is the responsibility of the student to submit these forms 2 weeks prior to departure.

Edited or incomplete forms will be considered invalid.

No travel arrangements should be booked till approval is given by PDSO.

Student Name:		Host Family Name:	
Student's Home Country		Host Family City	Host Family State
Student telephone or email address		Local School Representative	
Trip Start Date	Trip End Date	Form of Travel	
Destination of Trip		If flying, how will you get to the airport?	Airline/Flight Number
Purpose of Trip		If traveling by car, who will be driving?	Age of driver

Will you be traveling with your host family? Check one

Yes

No

If you will not travel with your host family, complete the information below. ***The person below must be at least 25 years of age and must complete and submit the Independent Receiving Party Form.***

Name of the adult you are staying with		Age of the adult	Relationship to student
Address			Phone number
City	State	Zip	Email Address

If you will miss school, complete the information below:

School approval granted by	Phone Number
Signature of school official	Title

Has this form been sent to the PDSO?

Yes

No

****this part is not required if the student is traveling with the host parents or going home for winter or summer breaks.***

PDSO Received Request Date:	PDSO Approved Date:
PDSO Signature:	PDSO Did Not Approve and Why?

HOST FAMILY PERMISSION

This portion must be completed by the Host Parent(s) if the student is traveling with a third party, including but not limited to, Natural Parents, family friends, school, club, church. I have verified the student will be staying with an approved adult.

I (we) have been consulted with and agree to the independent travel that our student proposes above. I (we) understand that this travel is independent from the diocesan program and that during his/her time away, our student will be responsible for him/herself. I (we) have received a full description of the trip's itinerary and feel assured that our student will be in good hands during his/her stay. Finally, I (we) will welcome this student back into my (our) home when he/she returns from this experience.

Host Parent Signature	Date
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By typing our name(s) in the signature lines above, we attest that all information has been given to the best of our knowledge and we agree to all terms and conditions of the Diocese of Davenport.



NATURAL PARENT TRAVEL RELEASE

It is the responsibility of the student to submit these forms 2 weeks prior to departure.
Edited or incomplete forms will be considered invalid.

Name of Student	Home Country	
Destination	Starting Date	Ending Date

Please indicate type of release?

_____ **For travel with Natural Parents**

For my son/daughter, I have requested and permit travel arrangements that differ from those set forth by the Diocese of Davenport for the program in which my child is enrolled. In requesting and permitting these special arrangements I acknowledge the following:

If during the period of my child's exchange experience my child leaves his/her state and family for the purpose of pleasure travel with the natural parents, the Diocese of Davenport program and its employees or representatives are released from all responsibility and liability for my child during the period he or she is away.

_____ **For travel with the Host Family outside of the United States**

For my son/daughter, I have requested and permit travel arrangements that differ from those set forth by the Diocese of Davenport program in which my child is enrolled. In requesting and permitting these special arrangements I acknowledge the following:

I authorize my child to travel with the host family and release and hold the Diocese of Davenport program for any injury – both physical or emotional, loss, delay, or any other damage or expense incurred by my child due to his/her participation in the program, or my decision to authorize my child to travel with the host family, for any event beyond the Diocese of Davenport program's reasonable control, including, without limitation, acts of God, acts of war or governmental restriction, any events directly or indirectly caused by international or negligent acts or omissions by any third party including but not limited to any member, guest, employee or agent of the host family or Diocese of Davenport program or other persons in the host country.

I understand that the Diocese of Davenport program is not responsible for advising what type of Visa, if any, is required to travel to another country with the host family.

_____ **For travel with school, church, club or any other Independent Party**

For my son/daughter, I have requested and permit travel arrangements that differ from those set forth by the Diocese of Davenport for the program in which my child is enrolled. In requesting and permitting these special arrangements I acknowledge the following:

I authorize my child to travel with (select one):

The following school, church, club, or Independent Party: _____

All schools, churches, clubs, or any other Independent Party:

I release and hold harmless the Diocese of Davenport for any injury – both physical or emotional, loss, delay, or any other damage or expense incurred by my child due to his/her participation in the program, or my decision to authorize my child to travel with the host family, for any event beyond the Diocese of Davenport program's reasonable control, including, without limitation, acts of God, acts of war or governmental restriction, any events directly or indirectly caused by international or negligent acts or omissions by any third party including but not limited to any member, guest, employee or agent of the host family or Diocese of Davenport program or other persons in the host country.

Natural Parent/Guardian Signature	Date
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By typing my name in the signature lines above, we attest that all information has been given to the best of our knowledge and we agree to all terms and conditions of the Diocese of Davenport.



OVERNIGHT TRIP WITHOUT HOST PARENTS

This form must be submitted for all overnight student travel with a third party.
It is the responsibility of the student to submit these forms 2 weeks prior to departure.
Edited or incomplete forms will be considered invalid.

Student Information

Name of Student	Home Country	
Destination	Date of Departure	Date of Return

Independent Party Receiving Agreement

Please initial that you agree with the following statements:

- _____ I confirm that I am 25 years old.
- _____ I confirm that I have the host family contact number.
- _____ I confirm that I have the agency local coordinator's number (if this applies).
- _____ I confirm that I have read the student Travel Proposal and will uphold all aspects of the proposal.
- _____ I am aware that the student is traveling in the United States with a F-1 visa. There are restrictions placed on student's holding a F-1 visa, and before I take any action that may jeopardize the student's Visa Status I will consult with the U.S. Homeland Security.
- _____ I will contact the agency local coordinator or host parent(s) should the student become ill or injured.
- _____ I will immediately contact the agency local coordinator and/or host parent(s) if there are any changes in the student's travel plans.

I promise to ensure the safety and well-being of the above named student while she/he travel or stays with me. I will follow all state and federal laws, as well as the rules that govern the Diocese of Davenport program while the student remains in my care.

Printed Name	Age	Telephone	
Address	City	State	Zip
Signature	Date		

By typing my name in the signature lines above, we attest that all information has been given to the best of our knowledge and we agree to all terms and conditions of the Diocese of Davenport.