



# OVERSEAS TRAVEL RISK ASSESSMENT

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Faculty, Institute or Other Area: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Travel Period: From Date \_\_\_\_/\_\_\_\_/\_\_\_\_ To Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Purpose of Trip: \_\_\_\_\_

**You should consider at a minimum the following items as part of your risk assessment:**  
 Further information on completing risk assessments, may be found in the [Risk Management Procedure](#)

I have consulted the Deakin information on <a href="#">health for travellers</a> , considered the resulting risks and will be taking appropriate health precautions	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a medical or physical condition(s), which could affect my participation in the proposed activities.	<input type="checkbox"/> No <input type="checkbox"/> Yes [complete i and ii below]	
i I have a clearance from my GP (which I have/will provide(d) to my insurer) to travel if I have a pre-existing health condition	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ii I have contacted the <a href="#">Risk Management Unit</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have previous in-country experience or knowledge	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have an understanding of the local culture and customs	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am able to speak the language	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a local contact and/or guide	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have consulted the <a href="#">DFAT smart traveller website</a> specific to the country/ies I am visiting and understand the advice contained on it. I have considered any risks associated with visiting these countries and will be taking appropriate precautions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have attended a relevant pre-departure session and/or training	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a crisis management/emergency management plan in place	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am travelling with a valid passport and appropriate visa	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have arranged coverage under an appropriate Travel Insurance Policy. <i>Please attach Product Disclosure statement if it is not the University Travel Insurance Policy.            You may be required to provide a Certificate of Currency.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have provided the University with a means of contacting me if required (please outline in controls below)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have obtained emergency assistance contact numbers	<input type="checkbox"/> Yes	<input type="checkbox"/> No

What controls are in place and what actions will you implement for any items ticked "No":

Signature of person travelling: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please send this form to the Travel Officer, Financial and Business Services Division, Geelong Campus @ Waurn Ponds via email [travel@deakin.edu.au](mailto:travel@deakin.edu.au) or internal mail or fax on 72682.