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| --- | --- | --- | --- | --- | --- | --- |
| **Organiser/Lead** | | Name of organiser/lead | | **Supervisor/P.I** | | Name of PI/supervisor of oraganiser/lead |
| **Participants (*if group*)** | | **Full names of participants** | | | **Supervisor/P.I of participants** | |
| Name of participant 1 | | | Name of supervisor of participant 1 | |
| Name of participant 2 | | | Name of supervisor of participant 2 | |
| Name of participant 3 | | | Name of supervisor of participant 3 | |
| Name of participant 4 | | | Name of supervisor of participant 4 | |
| Name of participant 5 | | | Name of supervisor of participant 5 | |
| Name of participant 6 | | | Name of supervisor of participant 6 | |
| Name of participant 7 | | | Name of supervisor of participant 7 | |
| Name of participant 8 | | | Name of supervisor of participant 8 | |
| Name of participant 9 | | | Name of supervisor of participant 9 | |
| Name of participant 10 | | | Name of supervisor of participant 10 | |
| **Start date** | Click or tap to enter a date. | | **Return date** | | Click or tap to enter a date. | |

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| --- | --- | --- | --- |
| **Type of off-site work** | Choose an item. | | |
| **Off-site work address** | Enter full address of off-site work | | |
| **Brief description of off-site work** | Enter description of off-site work | | |
| **Emergency contact at off-site work** | **Name** | **Email address** | **Contact number** |
| Full name of off-site contact | Email address of off-site contact | Phone number of off-site contact |
| **Accommodation address** | Click here to enter text. | | |
| **Travel arrangements** | Enter travel arrangements i.e. flight numbers | | |

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| **riskNET number of authorised travel risk assessment** | Click or tap here to enter text. |
| **riskNET number(s) of authorised experimental risk assessment(s)**  **(*only for experimental off-site work*)** | Click or tap here to enter text. |

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|  | **Yes** | **No** | **N/A** |
| If your experimental work involves radiation, have you registered as a radiation worker?  <https://www.ucl.ac.uk/safety-services/policies/2023/nov/how-become-radiation-worker-ucl> |  |  |  |
| Have you completed all the relevant training required at the host site? |  |  |  |
| Have you validated your travel insurance for the trip?  <https://www.ucl.ac.uk/staff/task/arrange-travel-insurance> |  |  |  |
| Have you insured any expensive equipment you’re taking? <https://www.ucl.ac.uk/finance/expenses-insurance/travel-advice/insurance-policies> |  |  |  |
| Are details of your next of kin up to date on [Portico](https://evision.ucl.ac.uk/urd/sits.urd/run/siw_lgn) (student travellers) or [Inside UCL](https://app.ucl.ac.uk/InsideUCL/Home) (staff traveller) |  |  |  |

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| ***Do you have emergency response plans (ERPs) in place in the event of emergencies?*** *Emergencies whilst travelling include but are not limited to: someone in the travel group is taken ill/sustains injuries, someone in the travel group gets lost, natural disaster/extreme weather conditions occur, accommodation plans fail (e.g. are overbooked or there is an emergency), transport fails, someone in the travel group is a victim of crime/terrorism* | |
| Yes, ERPs are in place |  |
| No, ERPs are not in place |  |

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| **If travelling abroad** | |
| **Local emergency services number** | Enter contact number |
| **Local embassy number** | Enter contact number |
| **Travel insurance number** | Enter contact number |

*Please send a copy of this itinerary to ChemEng.Safety@ucl.ac.uk*