Office of International Medical Education

Spring Service Learning Trips
Manual 2017-2018
Timeline

- Medical Students trip leaders selected  March
- Pharmacy Students trip leaders selected  April
  - PA
  - Dental
  - Nursing

- Participant Recruitment Announcement  April

- Faculty Recruitment  March – December
  - Collect documents for Apostille  October

- Trip Leader/ Lead Faculty Team meetings  May – December
- Development Committee  April – February
  - Fundraising events  September – January

- Submit Travel Authorization  August
- Cash Advance for lead faculty  November

- Book Travel
  - Plane  October
  - Bus  October
  - In-Country lodging, transportation  November

- Additions to the standard Pharm. List  November
- Purchase and receive meds  January
- Sort meds for trips  January
- Send in-country hosts docs, med lists, etc.  January
Contacts

Shawn Murphy: You can reach her by email at smurphy21@ufl.edu or by phone at 352.273.8580. Her office is located on the fourth floor of the Harrell Medical Education Building (HMEB) in suite 445. If you have questions regarding the following, you should email her directly:

- Travel authorization questions
- Reimbursements
- Booking for flights/buses
- Getting funds from your UFF account transferred into your UF account
- Your team's financial total (including revenues and expenses)

Christine DeBastiani: You can reach her by email at cdebastiani@ufl.edu or by phone at 352-273-5867. Her office is located in the 1329 building, Suite 3150 behind the Cancer Hospital. If you would like to meet with her, please email her and schedule a time to meet. If you have questions regarding the following, you should reach out to her directly:

- The Development Committee
- Development of fundraising strategies
- Questions about UF Foundation Policies or Processes related to types of donations (tax-deductible/non-tax deductible)

Dr. DeVos, Director, elizabeth.devos@jax.ufl.edu 352.273.6626
Dr. Grigg, Associate Director, james.grigg@medicine.ufl.edu, 352.273.6628

Website

The International Medical Education website is located at http://globalhealth.med.ufl.edu/. Each trip has its own website located under trips. It is the trip leaders’ responsibility (or you can designate someone within the trip group, the trip leader just needs to send the name, UF ID # and trip name the person will be responsible for it-delete to Shawn) to update your website. Please ensure you have the following:

- **An active website** If you want to have a blog as well, that is fine but the blog should be accessed only through a link on your website. Try to keep your website up to date with a list of your events, list of trip participants, pictures (**no pictures of patients**) from the most recent trip, etc. In this way it will help you arrange and promote these events.
- Please highlight and acknowledge on your website the partnering organizations and people (with their permission) that you work with. These organizations and people are critical for the success of the trips and the trips should be described as a **partnership** with the in-country organizations and people. Give them lots of credit—they deserve it!
- Online gifts - make sure your trip account number or appeal code automatically generates when clicking on the donation button on your website. On-line donations are sent directly to the UF Foundation program or trip Fund. If you need help with this please call Christine. For checks mailed to benefit your trip the only acceptable address to have these items mailed to is: Friends of Global Health P.O. Box 100213 Gainesville, FL 32610 (Please ensure all checks are made out to The University of Florida Foundation with the trip/program fund# on the memo line).
- Please review the entire International Medical Education website. If you think that other areas of the general International Medical Education website need updating or additional information or links need to be added/edited, please let Shawn, Dr. DeVos or Dr. Grigg know. We appreciate input on all aspects of the website. In fact, we need your input to keep the website current.
- **Only create or maintain YOUR trip's related web site(s)!**
Elective Credits

The Global Health elective entry is selected when a student is participating in an externship at a foreign institution. The student must complete and submit an International Medical Education Elective Application, at least 1 month prior to the start of the rotation, to be reviewed and approved by Dr. DeVos. This course can be scheduled for 2 weeks/2 credits or 4 weeks/4 credits.

The Leadership in Global Health elective entry is selected when a student has fulfilled the role of a trip leader in at least 1 mission trip and as a participant in 1 previous mission trip, or as a participant in 2 mission trips. The credits obtained for this course is a max of 2.

Students can participate in either of the above options; however, credit for Leadership in Global Health and Global Health Elective cannot be combined. Students can only receive credit for one of those options. Also, students may not combine Leadership in Global Health with Narrative Medicine or Community Service. There is a maximum of 2 credits for those courses. If in doubt please ask Beth Magyari.

Canvas

A new Canvas website has been created that has a Discussion board with the ability to attach documents. Also, there is an Announcements section to schedule meetings and send reminders. Because it is an internal site, you will need to login with your GatorID.

https://ufl.instructure.com/courses/328713

Financial Accounts

There are three (3) cost centers for the Global Health program and EACH trip (UFF > UFF171 > FCPA143). The UF Foundation (UFF) and Financial Services (FCPA/PeopleSoft) have processing fees associated with them when money is transferred or paid out of each fund/account (As would any bank with a small business customer – in fact, bank fees are more costly). Because clear paper trails and accountability are required by law to show the types/purposes of monies deposited, money cannot be co-mingled.

As a result, The UF Foundation and UF FCPA are two separate departments. Money is transferred automatically on a monthly basis between the UFF & UFF171 accounts. Only by request, is money transferred from UFF171 to FCPA143 to pay bills, move money to individual trip accounts or provide a cash advance. Shawn manages this and Dr. DeVos is the administrator of the funds and corresponding FCPA accounts.

The primary role of The UF Foundation and its fund accounts is to work like a non-profit clearinghouse (regulated by tax & non-profit law) for all donations to the university and its programs/funds. UFF sends out thank you donation tax-deductible letters to all donors.

The UFF171 account works like an intermediary “savings” account between the specific UFF Fund and FCPA143 accounts. When a bill needs to be paid or a specific amount of money divided between trips, a request is placed by Shawn to have that amount transferred from the UFF171 account to the FCPA143 account to be paid out/ transferred.

The UF Foundation charges all money deposited into their funds a 2.5% outgoing processing fee upon the automatic monthly transfer to UFF171. Funds in the Financial Services, FCPA143 accounts, will be charged a 4.5% outgoing payment/distribution processing fee.
In addition, UFF manages all incoming credit card transactions and holds the credit card company contracts. For convenience and timely payment, credit card payments are taken for BOTH donations (online fund payment through program & trip website link) AND event registration fees/merchandise, etc. Applicable 3% credit card and/or 6.5% FL sales tax fees (on the gross amount of the purchase) are charged to pay the credit card company for the use of online & on-site contracted credit card services and in compliance with FL law.

The Global Health program has access to the UF PCard, which is a credit card that can be used to spend funds (Shawn controls the PCard). The PCard expenditures will be paid out of the program or trip FCPA143 account AFTER a request has been transferred from UFF171 to cover the cost.

All donation funds must be deposited into The UF Foundation Global Health Program or Trip Fund. Remember, tax-deductible donations CANNOT BE earmarked for a specific student.

There are instances when money can be deposited DIRECTLY into the program or corresponding trip FCPA143 account:

1. If someone is giving money for YOU to attend a trip, that money can be deposited DIRECTLY into the UF FCPA143 account. The check should be made payable to “University of Florida,” signed, name of student in memo line & written amount complete. Shawn will ensure that the check is deposited into the correct trip account.
2. There are circumstances in which we are able to save processing fees (2%) by depositing money (NOT DONATION/CREDIT CARD MONEY) directly into the program or corresponding trip FCPA143 account.
Donation or a Non-Gift?

See the flow chart below and contact Christine with any questions.

- Each team has their own fund name and account number (see below) – It is essential to provide the fund name & # to potential donors AND to write it on donation checks received (Be sure to include the webpage and Fund name & # in donation Ask Letters & Emails). If you are receiving donations online, provide the fundraising web page associated with the trip (All credit card donations through the specific link will be deposited into that trip’s fund).

- The official trip names and account numbers are:
  - Project Haiti College of Medicine International Medical Education – Account # F018611
  - DR HELP College of Medicine International Medical Education – Account # F018607
  - DR SALUD College of Medicine International Medical Education – Account # F018609
  - Project HEAL College of Medicine International Medical Education – Account # F018605
  - Project Yucatan College of Medicine International Medical Education – Account # F018601
  - Project Nicaragua College of Medicine International Medical Education – Account # F019377
  - Lac Azuei College of Medicine International Medical Education – Account # F022067
**University of Florida College of Medicine Accounts**

The UF PeopleSoft accounts are used to spend money for/on the trip or for fundraising costs. Students are reimbursed for expenditures related to the trips. Shawn will submit the appropriate corresponding UF documentation, however **YOU MUST PROVIDE itemized expenses with clear receipts**. If you need to purchase goods for your events or get a down-payment for an event or transportation, please contact Shawn so that she can use her P-card to purchase these goods.

**STUDENTS MAY NOT SIGN CONTRACTS** on behalf of the University of Florida. If a contract is required for an event, please submit the contract to Shawn so she can get approval from Legal AND Financial Services. This process takes time. **Please allow at least 2 weeks for contract review and payment.**

*Any contract signed by a student will be that student’s responsibility (e.g., Golf Tournaments).*

**Private Bank Accounts**

We know that in the past, teams had different accounts where money was being held. There can be a significant liability when holding money in private accounts as well as running the risk of being prohibited from using the "UF" brand name with your trip. **For a donation to be tax-deductible, it must be deposited in the corresponding Program or trip UFF Fund account.** If you choose to have a private account, the only purpose should be to have some petty cash on hand for event registration (no more than a few hundred dollars). We understand you may need to have cash during event registration for change so that you can break larger bills.

**Financial Balance**

Financial Services can provide you with a monthly report on funds deposited, funds expended and a fund balance. The report will show the funds from both the UFF and the UF FSCA accounts. Please contact Shawn if you have questions about the report.

**Fund Balance**

Shawn can email trip leaders the Financial Services reports with the trip’s FCPA143 account information but only to your UF email account (because of the confidential information contained in the document, it CANNOT go outside the UF network). **For thank you card purposes, a list of donors and addresses can be furnished upon request, however no specific monetary amount can be disclosed for donor privacy.**

Foundation donor reports will be printed out and available to be picked up in her office on the 20th of the month. At that point, if there is someone that you thought donated, but you don't see them on your list of donors then you may contact Christine DeBastiani 352.273.7986:

- The name of the donor or organization
- How they paid (check or credit card)
- Date they donated

Christine can look in the UF Foundation database to see if the contribution was directed to another fund. Trip leaders are responsible for reviewing the list of donors with their respective teams, which should be done before contacting Christine or Shawn.

**Fundraising Information**

**Development Committee**

The Development Committee was put together to streamline fundraising efforts and provide direct access to Christine DeBastiani, your liaison with the UF COM Development Office and the UF Foundation. The committee meets as needed.
Each trip should select one person to serve on the Development Committee. A Development Committee member will:

- Serve as your trip’s contact person with Christine to ask any questions you may have about fundraising, donations, etc.
- Relay information to their trip leaders and the rest of their team if needed.
- Plan and implement fundraising efforts.

**Events/Fundraisers**

**Advertising:**

- All logos must be approved ahead of time through the UFF and College of Medicine Communications by sending them to Christine. If you want to use "The University of Florida" brand along with your event, any logo must first go through marketing for approval.
  - Send all logos to Christine DeBastiani at cdebastiani@ufl.edu
  - You are allowed to use the approved College of Medicine logo (Be careful not to stretch or warp the logo).
  - To be safe, send all logos as soon as possible so that events, marketing, etc. are not held up.

**Payments:**

- Checks should be made payable to the University of Florida.
- **Credit cards can ONLY be taken by a UF staff member** as annual training is required to understand the risks, liability and precautions when using a credit card machine (the machines used are PCI Compliant).
- **Students are NOT ALLOWED to take credit cards via smartphone programs** (this is NOT a secure way to run a payment and YOU, as “the merchant” will be liable should any damages occur) and may place the cardholder at risk for identity theft.
- If you are hosting a fundraiser and would like to take credit cards, contact Christine DeBastiani as soon as you set the date for your event. She will reserve a credit card machine if one is available. Machines are shared among all schools and services on campus, therefore, it is best to reserve them as soon as possible. Christine, Shawn or another UF staff member affiliated with the program will need to be available to run the machine during your event.
- If a staff member is unavailable to run the machine, you will not be allowed to accept credit cards which could negatively impact the revenue of your event.
- If someone pays only the cost required for them to get into or participate in the event (door fee), we do not need any contact information. This is NOT a donation and no tax-deductible letter by the UFF will be issued.
- If a donation is made above and beyond the entrance/participation fee, then the donor needs to complete the College of Medicine donation/pledge form to record and authorize the donation (name, address, phone number and amount of donation **not total payment**).

\[
\text{Total payment} - \text{entrance fee/participation fee} = \text{Donation.}
\]

It is easiest to just say that all proceeds go to benefit International Medical Education and that nothing is tax deductible.

**Post Event:**

- Maintain a total budget of what it cost to put on the event (supplies, merchandise for resale, contracted space, vendors, etc). Indicate **HOW IT WAS PAID** and date (Student reimbursement, Global Health PCard, Invoice to Shawn). Then include the:

\[
\text{Total Revenue} - \text{Expenditures} = \text{Profit.}
\]

*This is important information for future trip leaders, so pass it on!*
- All proceeds from events/fundraisers should be given to Christine as soon as possible including:
  - Date/Time of event
  - Cash, Checks, Credit Card payment slips, Credit Card settlement & Totals Reports.
  - Gift-in-Kind donation record (complete spreadsheet with names, addresses, donation value) if the event is a Silent Auction.
  - Silent Auction Bid Sheets

Trip Deposits collected from trip participants (required of people attending the trip): Should be made out to the University of Florida and given to Shawn.

Money from event registrations (generally not tax deductible): Should be made out to the University of Florida AND include the trip name in the memo on the check. See above post-event directions.

Money from merchandise sales: Checks should be written to UF not UFF, UNLESS a donation is made above and beyond the cost of the merchandise. Please note on the check the price of the item purchased and the absolute value of the donation. See above payment directions.

**Silent Auction**

Please contact Christine DeBastiani prior to hosting the silent auction so she can help you remain compliant for all silent auction documentation and processes for state and federal laws.

**Donation of Auction Items (Gift-in-Kind Spread Sheet can be found on webpage)**

You must keep a log of all items that are donated, and this must be provided to Christine DeBastiani. Your donors will not receive receipts for their donated items unless the following information is provided to Christine:

- Item donated
- Value of Item
- Business that Donated
- Contact Person
- Address
- Phone Number
- Any supporting documentation to verify the price of the donated item (letter from business, receipt, appraisal, written quote, etc.)
- UF staff verification of receipt and location of donated item

**Verification of Auction Items**

Any physical donation to UF must be verified as received by a UF faculty or staff member. YOU CAN:

- Collect the items and have them verified all at once or individually (in-person or by photo)

  *It is the decision of the verifier to outline the method he/she is most comfortable with – so ask first!*
Below is the template for the Silent Auction Record for items received, double click to open.

Selling of Auction Items *(Auction Bid Sheets can be found on webpage)*

Below is the template for Silent Auction Bid sheet, double click to open.

You must use bid sheets and take down the following information about the winning bidder:

- Name
- Address
- Phone Number
- Winning Bid
- Method of Payment (CC, Check, Cash)

**Donation of Medical Supplies or other In-Kind Gift**

Please note that students cannot accept any physical gift on behalf of the University of Florida.

If you have a donor who would like to give medical supplies or some other type of in-kind gift, please email Christine DeBastiani before you guarantee someone we can take their gift. Their gift will need to be reviewed by UFF Legal first. Your email to Christine should include:

- What the gift is
- Be specific: What type of drug, what type of medical instruments, what supplies, etc.
Once you hear from Christine that the donation can be accepted, a UF faculty or staff member must receive the physical donation. Ideally, this would be the faculty member from your trip. Ask them to email Christine that the donation has been received, and the donor’s gift can then be processed.

**Email solicitations: (Templates available on web page)**

We encourage you to save costs by using email for as many “Asks/Solicitations” as you can. Emails can be personalized, are FREE and can be sent multiple times. **DO NOT** send out one email to your whole address book. It is more impactful to your family and friends if the email is personalized and sent to individuals one at a time.

Christine has created templates in email and letter form to make things easier. Also, please make sure that your trip’s website online direct donation link goes to your group giving page (you can check this by the Fund # that populates the giving form).

- Send individually to your family and friends
- Personalize the introduction
- Include link to your website’s online giving page - make sure this page is updated
  - [www.uff.ufl.edu/appeals/ProjectHaiti](http://www.uff.ufl.edu/appeals/ProjectHaiti)
  - [www.uff.ufl.edu/appeals/ProjectHEAL](http://www.uff.ufl.edu/appeals/ProjectHEAL)
  - [www.uff.ufl.edu/appeals/ProjectYucatan](http://www.uff.ufl.edu/appeals/ProjectYucatan)
  - [www.uff.ufl.edu/appeals/DRHELP](http://www.uff.ufl.edu/appeals/DRHELP)
  - [www.uff.ufl.edu/appeals/DRSALUD](http://www.uff.ufl.edu/appeals/DRSALUD)
  - [www.uff.ufl.edu/appeals/ProjectNicaragua](http://www.uff.ufl.edu/appeals/ProjectNicaragua)
  - [Lac Azuei page to come](http://www.uff.ufl.edu/appeals/ProjectNicaragua)

- If they want to send a check, it needs to be filled out to “The University of Florida Foundation, Inc. and in the memo line (example)”DR SALUD International Medical Education Fund – F018609”

  All checks need to be mailed to:
  University of Florida
  Office of International Medical Education
  c/o Shawn Murphy
  P.O. Box 100213,
  Gainesville, FL, 32610-0228

**Mail Solicitations: (Template available below)**

There are some people who you may want to mail a letter to instead of an email...your parents or grandparents for example.

- Personalize the introduction
- Include information of how to address the checks and where to mail them to
- Include your website so they can give online if they prefer
- Hand sign the letters
- **Please note:** the cost of all mailings will be paid for by the student (if you are asking money for yourself) or by the group (if you letter is asking for a DONATION to the program or a trip). This includes printing, paper, envelopes, and stamps.

If you mail a letter to someone - you must include the following:
Checks need to be filled out to “The University of Florida Foundation Friends of Global Health—group name and Fund Account #” (e.g., DR SALUD COM International Medical Education F018609). Reference the fund numbers above.

Checks may ONLY be mailed to:

Friends of Global Health
University of Florida
PO Box 100213
Gainesville, FL 32610-0228

Students MAY NOT list their private residence on the Trip website, email solicitations or mailed “ask letters” for donation purposes. All donations must be made through one of three channels:

1. Directly through the Trip pages donation link on the website.
2. By check made out to UF COM with Trip name and Fund number listed.
3. By giving cash to a trip leader or participant and then converting the cash to check or money order before depositing through Shawn into the Trip UFF Fund.

Ask Letters

Dear XXX,

This upcoming March, The UF College of Medicine Office of Global Health, medical students will coordinate six medical service trips to Guatemala, Ecuador, Haiti, the Virgin Islands, and the Dominican Republic to support medical education and training. The trips will be for six students as our搭建is, fulfilling different needs of each country’s underserved population. Our goal is to improve the health of the community and to provide knowledge and tools to the local communities.

We have a goal to raise $20,000 for each Trip. This includes travel costs and lodging, as well as supplies and medications. We will bring all the necessary equipment and supplies. We are committed to serving the local community in the best way possible.

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Sincerely,

[Student Name]
[Student Email]
[City, State Zip Code]

Travel Authorizations (TA) and Booking Flights & Travel

These are required in advance to ensure that the proper amount of money is in your UF account to pay for the trip. Without the TA we can’t book your flights or any of your travel. UF Policy also requires a TA be set up before the P-card (UF credit card) can be used for the trip expenses. Please create and submit the TA in August.

You can set up a TA as soon as you have the roster for your trip. Do not wait until you want to purchase tickets. Please include a 25% buffer when calculating the costs of your tickets, for fundraising and for delays in getting your
TA approved before the deadlines set by the airline to guarantee pricing. It can take some time to get a TA approved because there are lots of signatures required. Please submit the TA to Shawn first thing in the fall. Once a TA is approved, Shawn will be allowed to book and put down deposits on flights for you. It’s important to know that there must be sufficient funds in your account to cover the flight deposit.

Information required to be submitted with the TA:

- Estimated budget for your trip (use your past trip’s budget). This is just an estimate.
  - The budget should include: the cost of the hotels, air travel, bus travel and what you will need for as a cash advancement (cash you want to take in country)
- The template for the TA asks you to identify a lead faculty member. This faculty member must be an ACTIVE UF EMPLOYEE.
  - The cash advance money will be deposited to your lead faculty’s payroll bank account. Dr. DeVos or Dr. Grigg will talk with them to go over these responsibilities.
  - All receipts must be kept for money spent from cash advance. Any unused funds must be returned to the faculty member to return to the University.
  - If your lead faculty changes for any reason, you must contact Shawn IMMEDIATELY. We will need to re-start the TA process.
- A roster listing the student and faculty names going the trip.
  - If you have not selected all participants, include the number of participants you are expecting from each college.
  - For example “2 PA students, 3 pharmacy students and 2 faculty members to be determined”.

*Although the TA is just an estimate of your costs, we strongly recommend that you pay for as many services and contracts as you can prior to the trip.

**IMPORTANT**

You will not be reimbursed for expenses outside the TA unless you have proper receipts and expenses were paid by the Lead Faculty or Student Trip Leader. Any expense that is incurred in country must be paid for by the Lead Faculty member or Student Trip Leader. A receipt must be collected. Here is an example of a self-made receipt that can be used to obtain information from vendors who do not provide receipts.

```
Receipt

Business name: ______________________________

Business address/location: __________________________

Service or good provided: _____________________________

Amount paid (total/total) _____________________________

Signature: ________________________________

Name of person signing: ___________________________

Date: ________________________________

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Booking Pre-trip Services

Contracts: STUDENTS MAY NOT SIGN CONTRACTS! Before reserving any services (including hotels, transportation, supplies), you should contact your in-country host to obtain a contract for review by UF. You will be required to submit a contract for each service you wish to book before it can be paid for. The review process takes time, so please do this far in advance. Contracted purchases can be paid for with Shawn’s pcard but the funds must be available in the trip fund before the purchase is made.

- Hotels
- Buses
- Flights
- Medications/Medical Supplies*All contracts must be in English, and must spell out the details of arrangements clearly

<table>
<thead>
<tr>
<th>Trip Name:</th>
<th>Travel Dates:</th>
</tr>
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<tbody>
<tr>
<td>Number of Participants:</td>
<td></td>
</tr>
<tr>
<td>Trip Name:</td>
<td></td>
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<tr>
<td>Lead Faculty</td>
<td></td>
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<tr>
<td>UF ID #</td>
<td></td>
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<tr>
<td>e-mail address</td>
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<td>phone number</td>
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<table>
<thead>
<tr>
<th>Total Cost</th>
<th>example: $32 x 19 participants</th>
<th>$608.00</th>
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<tbody>
<tr>
<td>Total cost of Rooms + Taxes</td>
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<tr>
<td>Parking Fees</td>
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<tr>
<td>Other:</td>
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<tr>
<td>Transportation in US</td>
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<td>$0.00</td>
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<tr>
<td>Mileage (.445/mile) if driving to airport</td>
<td>N/A</td>
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</tr>
<tr>
<td>Bus to/from airport</td>
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<td></td>
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<tr>
<td>Airlines</td>
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<td>$0.00</td>
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<tr>
<td>Cost of flight x # of participants</td>
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<tr>
<td>Baggage fees (both ways)</td>
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<tr>
<td>Airport Parking</td>
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<td></td>
</tr>
<tr>
<td>Transportation in Country</td>
<td>N/A</td>
<td>$0.00</td>
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<tr>
<td>Bus</td>
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<td>Other:</td>
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<td>$0.00</td>
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<td>Miscellaneous</td>
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<tr>
<td>Food</td>
<td></td>
<td></td>
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<tr>
<td>Trip Name:</td>
<td></td>
<td></td>
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<tr>
<td>Travel Dates:</td>
<td></td>
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</tbody>
</table>

CISI Insurance Information

- All students are required to purchase CISI insurance through the UF International Center, unless they have GatorGradCare or GatorCare.

1. The trip leader for each trip should submit the following spreadsheet with complete information to Linda Gritman or Yanping Cheng. Shawn will process one check made out to the University of Florida that covers all trip participants at $35/month per person after trip leaders have collected the fee from each attendee (not including those with GatorGradCare).

2. A completed enrollment spreadsheet. (Please add all participants to the spreadsheet and indicate whether or not they have GatorGradCare insurance).

3. A complete itinerary of the proposed trip, including contact information onsite to be sent to shill@ufic.ufl.edu. It can be added to the bottom of the CISI enrollment spreadsheet but it is required for the trip to submit this information or it cannot go out of country!
IMPORTANT: All students and accompanying faculty will also have to complete the online travel registration. (ctrl + click to open hyper link to UFIC)
As noted on the following information below needs to be completed for ALL STUDENTS attending the trip along with the onsite location, contact information and the Itinerary (departure and arriving times):

- Name
- UFID
- GGC Coverage (yes/no) (Gator Grad Care Coverage)
- Date of birth
- Gender
- Start and End Date of trip
- Citizenship
- Country of Destination
- Program Name
- Email
- Address

All non-UF professionals/participants that volunteer cannot logon to the travel registration site but if they turn in the attached form, SEE BELOW, we can cover them and should cover them with the TeamAssist policy for emergency medical assistance, like transport to a medical facility, repatriation/return and evacuation services. Just like UF faculty their own personal health insurance would be responsible for physician and hospital services. And to clarify, only students can and must be enrolled in CISI so they will not need the TeamAssist offered in the registration process because the CISI policy is all inclusive.

TeamAssistApplicationForm.pdf

At the bottom of this spreadsheet please included the following: (The information below is needed
- Onsite contact information
- Accompanying/LEAD faculty and cellphone number
- Complete itinerary
The student group will be approved to travel and enrolled in CISI when the following are submitted with this spreadsheet:

The faculty director name and cell number:
Group itinerary:
Site contact information:
Submit chartfield for the processing of an E2R if enrollment is to be paid by the department:
Provide a fiscal contact email address to send the journal entry information for E2R:
Send this file to lgritma@ufic.ufl.edu or ycheng@ufic.ufl.edu
World Class Coverage Plan

designed for

University of Florida

Study Abroad Participants

2017-2018

Policy # GLM N04983920

Administered by Cultural Insurance Services International • 1 High Ridge Park • Stamford, CT 06905-1322
This plan is underwritten by ACE American Insurance Company

<table>
<thead>
<tr>
<th>Coverage and Services</th>
<th>Maximum Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidental Death and Dismemberment Per Insured Person</td>
<td>$25,000 *</td>
</tr>
<tr>
<td>Medical expenses (per Covered Accident or Sickness):</td>
<td></td>
</tr>
<tr>
<td>Deductible</td>
<td>zero</td>
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<tr>
<td>Benefit Maximum</td>
<td>$250,000 at 100%</td>
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<tr>
<td>Extension of Benefits</td>
<td>30 days</td>
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<td>Emergency Medical Reunion</td>
<td>$2,000</td>
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<tr>
<td>(incl. hotel/meals, max $150/day)</td>
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</tr>
<tr>
<td>Home Country Coverage Limit</td>
<td>$10,000</td>
</tr>
<tr>
<td>Trip Reunification</td>
<td>$1,000</td>
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<td>Team Assist Plan (TAP): 24/7 medical, travel, technical assistance</td>
<td></td>
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<tr>
<td>Emergency Medical Evacuation</td>
<td>$100,000</td>
</tr>
<tr>
<td>Repatriation/Return of Mortal Remains</td>
<td>$100,000</td>
</tr>
<tr>
<td>Security Evacuation (Comprehensive)*</td>
<td>$100,000</td>
</tr>
<tr>
<td>*Aggregate of $1M</td>
<td></td>
</tr>
</tbody>
</table>

Policy terms and conditions are briefly outlined in this Description of Coverage. Complete provisions pertaining to this insurance are contained in the Master Policy on file with University of Florida under form number AH-15090. In the event of any conflict between this Description of Coverage and the Master Policy, the Policy will govern.
Benefit Provisions

Accidental Death and Dismemberment Benefit

Accidental Death Benefit. If Injury to the Insured Person results in death within 365 days of the date of the Covered Accident that caused the Injury, We will pay 100% of the Benefit Amount.

Accidental Dismemberment Benefit. If Injury to the Insured Person results, within 365 days of the date of the Covered Accident that caused the Injury, in any one of the Losses specified below, We will pay the percentage of the Benefit Amount shown below for that Loss:

For Loss of: Percentage of Benefit Amount:
Both Hands or Both Feet 100%
Sight of Both Eyes 100%
One Hand and One Foot 100%
One Hand and the Sight of One Eye 100%
One Foot and the Sight of One Eye 100%
Speech and Hearing in Both Ears 100%
One Hand or One Foot 50%
The Sight of One Eye 50%
Speech or Hearing in Both Ears 50%
Hearing in One Ear 25%
Thumb and Index Finger of Same Hand 25%

“Loss of a Hand or Foot” means complete severance through or above the wrist or ankle joint. “Loss of Sight of an Eye” means total and irrecoverable loss of the entire sight in that eye. “Loss of Hearing in an Ear” means total and irrecoverable loss of the entire ability to hear in that ear. “Loss of Speech” means total and irrecoverable loss of the entire ability to speak. “Loss of Thumb and Index Finger” means complete severance through or above the metacarpophalangeal joint of both digits. If more than one Loss is sustained by an Insured Person as a result of the same Covered Accident, only one amount, the largest, will be paid. Maximum aggregate benefit per occurrence is $1,000,000.

Accident and Sickness Medical Expenses

We will pay Covered Expenses due to Accident or Sickness only, as per the limits stated in the Schedule of Benefits. Coverage is limited to Covered Expenses incurred subject to Exclusions. All bodily Injuries sustained in any one Covered Accident shall be considered one Disablement, all bodily disorders existing simultaneously which are due to the same or related causes shall be considered one Disablement. If a Disablement is due to causes which are the same or related to the cause of a prior Disablement (including complications arising therefrom), the Disablement shall be considered a continuation of the prior Disablement and not a separate Disablement.

Treatment of an Injury or Sickness must occur within 30 days of the Accident or onset of the Sickness.

When a Covered Injury or Sickness is incurred by the Insured Person We will pay Reasonable and Customary medical expenses as stated in the Schedule of Benefits. In no event shall Our maximum liability exceed the maximum stated in the Schedule of Benefits as to Covered Expenses during any one period of individual coverage.

Covered Accident and Sickness Medical Expenses

Only such expenses, incurred as the result of a covered Accident or Sickness, which are specifically enumerated in the following list of charges, and which are not excluded in the Exclusions section, shall be considered as Covered Expenses:

- Charges made by a Hospital for room and board, floor nursing and other services inclusive of charges for professional service and with the exception of personal services of a non-medical nature; provided, however, that expenses do not exceed the Hospital’s average charge for semiprivate room and board accommodation.

- Charges made for Intensive Care or Coronary Care charges and nursing services.

- Charges made for diagnosis, treatment and surgery by a Doctor.

- Charges made for an operating room.

- Charges made for outpatient treatment, same as any other treatment covered on an inpatient basis. This includes ambulatory surgical centers, Doctors’ outpatient visits/examinations, clinic care, and surgical opinion consultations.

- Charges made for the cost and administration of anesthetics.

- Charges for medication, x-ray services, laboratory tests and services, the use of radium and radioactive isotopes, oxygen, blood, transfusions, iron lungs, and medical treatment.

- Dressings, drugs, and medicines that can only be obtained upon a written prescription of a Doctor or surgeon.

- Charges made for artificial limbs, eyes, larynx, and orthotic appliances, but not for replacement of such items.

- Local transportation to or from the nearest Hospital or to and from the nearest Hospital with facilities for required treatment. Such transportation shall be by licensed ground ambulance only.

- Charges for physiotherapy, if recommended by a Doctor for the treatment of a specific Disablement and administered by a licensed physiotherapist.

- Nervous or Mental Disorders are payable a) up to $1,000 for outpatient treatment; or b) up to $5,000 on an inpatient basis. We shall not be liable for more than one such inpatient or outpatient occurrence under the Policy with respect to any one Insured Person.

- Chiropractic Care and Therapeutic Services shall be limited to a total of $50 per visit, excluding x-ray and evaluation charges, with a maximum of 10 visits per Injury or Sickness. The overall maximum coverage per Injury or Sickness is $500 which includes x-ray and evaluation charges.

- Accidental dental charges for emergency dental repair or replacement to natural teeth damaged as a result of a covered Injury including expenses incurred for services or medications prescribed, performed or ordered by dentist.

- With respect to Palliative Dental, an eligible Dental condition shall mean emergency pain relief treatment to natural teeth up to $500 ($250 maximum per tooth).

- Pregnancy, childbirth or miscarriage if conception occurs while the policy is in force.

- Charges due to a Pre-Existing Condition are limited to $100,000.

Extension of Benefits

Medical benefits are automatically extended 30 days after expiration of Insurance for conditions first diagnosed or treated during or related to your overseas study program with the University of Florida. Benefits will cease at 12:00 a.m. on the 31st day following Termination of Insurance.
Emergency Medical Reunion Benefit
When an Insured Person is hospitalized for more than 6 consecutive days, we will reimburse for round trip economy-class transportation for one individual selected by the Insured Person, from the Insured Person's current Home Country to the location where the Insured Person is hospitalized. The benefits reimbursable will include:

- The cost of a round trip economy airfare and their hotel and meals up to the maximum stated in the Schedule of Benefits, Emergency Medical Reunion.

Home Country Benefit
We will pay the benefit shown in the Schedule of Benefits when during a scheduled trip outside of the Home Country, the Insured Person returns to his or her Home Country or Permanent Residence for incidental visits provided the primary reason for the Insured Person's return to the Home Country or Permanent Residence is not to obtain medical treatment for an Injury or Sickness that occurred while traveling.

Benefits are payable under the Policy only to the extent that Covered Expenses are not payable under any other domestic health care plan.

Home Country Benefit payments are subject to any applicable Benefit Maximum shown in the Schedule of Benefits. This coverage will end on the earlier of the date the Insured Person's would otherwise end or the end of the Policy Term.

Trip Reunification Benefit
We will reimburse the cost of the Insured Person's economy one way air and/or ground transportation ticket for him or her to return to the area of his or her principal residence, up to the Benefit Maximum shown in the Schedule of Benefits, if his or her Trip is interrupted as the result of the death of a Family Member.

The total benefits payable under the Trip Reunification Benefit will not exceed the maximum stated in the Schedule of Benefits.

Exclusions and Limitations
For benefits listed under Accidental Death and Dismemberment, this insurance does not cover:

- Disease of any kind.
- Bacterial infections except pyogenic infections which occur from an accidental cut or wound.
- Neuroses, psychoneuroses, psychopathies, psychoses or mental or emotional diseases or disorders of any type.
- Intentionally self-inflicted Injury; suicide or attempted suicide (Applicable to Accidental Death and Dismemberment benefits only).
- War or any act of war, whether declared or not.
- Injury sustained while riding as a pilot, student pilot, operator, or crew member, in or on, boarding or alighting from, any type of aircraft.

Injury occasioned or occurring while committing or attempting to commit a felony, or to which the contributing cause was the Insured Person being engaged in an illegal occupation.

In addition, this Insurance does not cover Medical Expense Benefits for:

- Charges incurred for surgery or treatments which are experimental/investigational, or for research purposes.
- Services, supplies or treatment, including any period of Hospital confinement, which were not recommended, approved and certified as Medically Necessary and reasonable by a Doctor.
- War or any act of war, whether declared or not.
- Injury sustained while participating in professional athletics.
- Routine physicals, immunizations, or other examinations where there are no objective indications or impairment in normal health, and laboratory, diagnostic or x-ray examinations, except in the course of an Injury or Sickness established by a prior call or attendance of a Doctor.
- Treatment of the temporomandibular joint.
- Vocational, speech, recreational or music therapy.
- Services or supplies performed or provided by a Relative of the Insured Person, or anyone who lives with the Insured Person.
- The refusal of a Doctor or Hospital to make all medical reports and records available to Us which will cause an otherwise valid claim to be denied.
- Cosmetic or plastic surgery, except as the result of a covered Injury; for the purposes of this Policy, treatment of a deviated nasal septum shall be considered a cosmetic condition.
- Elective Surgery or Elective Treatment which can be postponed until the Insured Person returns to his/her Home Country or Permanent Residence, where the objective of the trip is to seek medical advice, treatment or surgery.
- Treatment and the provision of false teeth or dentures, normal hearing tests and the provision of hearing aids.
- Eye refractions or eye examinations for the purpose of prescribing corrective lenses for eye glasses or for the fitting thereof, unless caused by an Injury incurred while insured hereunder.
- Treatment while confined primarily to receive custodial care, educational or rehabilitative care, or nursing services.
- Congenital abnormalities and conditions arising out of or resulting therefrom.
- The cost of the Insured Person’s unused airline ticket(s) for transportation back to the Insured Person’s Home Country or Permanent Residence, where an Emergency Medical Evacuation or Repatriation of Remains benefit is provided.
- Expenses as a result of or in connection with the commission of a felony offense.
- Injury sustained while taking part in mountaineering where ropes or guides are normally used; hang gliding; parachuting; bungee jumping; racing by horse, motor vehicle or motorcycle; parasailing. (except as provided by the Policy)
- Treatment paid for or furnished under any mandatory government program or facility set up for treatment without cost to any individual.
- Injury or Sickness covered by Workers’ Compensation, Employers’ Liability laws, or similar occupational benefits.
Injuries for which benefits are payable under any no-fault automobile insurance policy.

- Routine dental treatment.
- Drugs, treatments or procedures that either promote or prevent conception, or prevent childbirth, including but not limited to: artificial insemination, treatment for infertility or impotency, sterilization or reversal thereof, or abortion.
- Treatment for human organ tissue transplants and related treatment.
- Weak, strained or flat feet, corns, calluses, or toenails.
- Diagnosis and treatment of acne.
- Injury sustained while the Insured Person is riding as a pilot, student pilot, operator or crew member, in or on, boarding or alighting from, any type of aircraft.
- Dental care, except as the result of Injury to natural teeth caused by a Covered Accident, unless otherwise covered under this Policy.

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit Us from providing insurance, including, but not limited to, the payment of claims.

Subrogation
To the extent the Company pays for a loss suffered by an Insured Person, the Company will take over the rights and remedies the Insured Person had relating to the loss. This is known as subrogation. The Insured Person must help the Company to preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured Person’s rights, the Insured Person must sign an appropriate subrogation form supplied by the Company.

Definitions
Coinsurance means the percentage amount of eligible Covered Expenses, after the Deductible, which are the responsibilities of the Insured Person and must be paid by the Insured Person. The Coinsurance amount is stated in the Schedule of Benefits, under each stated benefit.

Company shall be ACE American Insurance Company.

Covered Accident means an event, independent of Sickness or self-inflicted means, which is the direct cause of bodily Injury to an Insured Person.

Covered Expenses means expenses which are for Medically Necessary services, supplies, care, or treatment due to Sickness or Injury, prescribed, performed or ordered by a Doctor, and Reasonable and Customary charges incurred while insured under this Policy, and that do not exceed the maximum limits shown in the Schedule of Benefits, under each stated benefit.

Deductible means the amount of eligible Covered Expenses which are the responsibility of each Insured Person and must be paid by each Insured Person before benefits under the Policy are payable by Us. The Deductible amount is stated in the Schedule of Benefits, under each stated benefit.

Doctor as used in this Policy means a doctor of medicine or a doctor of osteopathy licensed to render medical services or perform surgery in accordance with the laws of the jurisdiction where such professional services are performed.

Effective Date means the date the Insured Person’s coverage under the Policy begins. An Eligible Person will be insured on the latest of: 1) the Policy Effective Date; 2) the date he or she is eligible; or 3) the date requested by the Participating Organization provided the required premium is paid.

Eligible Benefits means benefits payable by Us to reimburse expenses that are for Medically Necessary services, supplies, care, or treatment due to Sickness or Injury, prescribed, performed or ordered by a Doctor, and Reasonable and Customary charges incurred while insured under this Policy; and which do not exceed the maximum limits shown in the Schedule of Benefits under each stated benefit.

Emergency means a medical condition manifesting itself by acute signs or symptoms which could reasonably result in placing the Insured Person’s life or limb in danger if medical attention is not provided within 24 hours.

Family Member means an Insured Person’s spouse, domestic partner, child, brother, sister, parent, grandparent, or immediate in-law.

Home Country means the country where an Insured Person has his or her true, fixed and permanent home and principal establishment or the United States.

Hospital as used in this Policy means, except as may otherwise be provided, a Hospital (other than an institution for the aged, chronically ill or convalescent, resting or nursing homes) operated pursuant to law for the care and treatment of sick or injured persons with organized facilities for diagnosis and surgery and having 24-hour nursing service and medical supervision.

Injury wherever used in this Policy means bodily Injury caused solely and directly by violent, accidental, external, and visible means occurring while this Policy is in force and resulting directly and independently of all other causes in a loss covered by this Policy.

Insured Person(s) means a person eligible for coverage under the Policy as defined in “Eligible Persons” who has applied for coverage and is named on the application if any and for whom We have accepted premium.

Medically Necessary or Medical Necessity means services and supplies received while insured that are determined by Us to be: 1) appropriate and necessary for the symptoms, diagnosis, or direct care and treatment of the Insured Person’s medical conditions; 2) within the standards the organized medical community deems good medical practice for the Insured Person’s condition; 3) not primarily for the convenience of the Insured Person, the Insured Person’s Doctor or another service provider or person; 4) not experimental/investigational or unproven, as recognized by the organized medical community, or which are used for any type of research program or protocol; and 5) not excessive in scope, duration, or intensity to provide safe, adequate, and appropriate treatment.

Mental and Nervous Disorder means a Sickness that is a mental, emotional or behavioral disorder.

Permanent Residence means the country where an Insured Person has his or her true, fixed and permanent home and principal establishment, and to which he or she has the intention of returning.

Pre-Existing Condition means an illness, disease, or other condition of the Insured Person within 180 days prior to the Insured Person’s coverage becoming effective under the Policy: 1) first manifested itself, worsened, became acute, or exhibited symptoms that would have caused a person to seek diagnosis, care, or treatment; or 2) required taking prescribed drugs or medicines, unless the condition for which the prescribed drug or medicine is
The Team Assist Plan provides services and pays expenses up to the amount shown in the Schedule of Benefits for: "Emergency Medical Evacuation."

**Emergency Medical Evacuation Benefit**

The Company shall pay benefits for Covered Expenses incurred up to the maximum stated in the Schedule of Benefits, if any Injury or Covered Sickness commencing during the Period of Coverage results in the Medically Necessary Emergency Medical Evacuation of the Insured Person. The decision for an Emergency Medical Evacuation must be ordered by the Assistance Company in consultation with the Insured Person’s local attending Doctor.

**Repatriation/Return of Mortal Remains or Cremation Benefit**

The Company will pay the reasonable Covered Expenses incurred up to the maximum as stated in the Schedule of Benefits, Repatriation/Return of Mortal Remains, to return the Insured Person’s remains to his/her then current Home Country or Permanent Residence, if he or she dies. Covered Expenses include, but are not limited to, expenses for embalming, cremation, a minimally necessary container appropriate for transportation, shipping costs and the necessary government authorizations. All Covered Expenses in connection with a Return of Mortal Remains must be pre-approved and arranged by an Assistance Company representative appointed by the Company.

**The TAP offers these services:**

(These services are not insured benefits)

**Medical Assistance**

Medical Referral Referrals will be provided for doctors, hospitals, clinics or any other medical service provider requested by the Insured. Service is available 24 hours a day, worldwide.

Medical Monitoring In the event the Insured is admitted to a foreign hospital, the AP will coordinate communication between the Insured’s own doctor and the attending medical doctor or doctors. The AP will monitor the Insured’s progress and update the family or the insurance company accordingly.

Prescription Drug Replacement/Shipment Assistance will be provided in replacing lost, misplaced, or forgotten medication by locating a supplier of the same medication or by arranging for shipment of the medication as soon as possible.

Emergency Message Transmittal The AP will forward an emergency message to and from a family member, friend or medical provider.

Coverage Verification/Payment Assistance for Medical Expenses The AP will provide verification of the Insured’s medical insurance coverage when necessary to gain admittance to foreign hospitals, and if requested, and approved by the Insured’s insurance company, or with adequate credit guarantees as determined by the Insured, provide a guarantee of payment to the treating facility.
Travel Assistance

Obtaining Emergency Cash  The AP will advise how to obtain or to send emergency funds world-wide.

Traveler Check Replacement Assistance  The AP will assist in obtaining replacements for lost or stolen traveler checks from any company, i.e., Visa, Master Card, Cooks, American Express, etc., worldwide.

Lost/Delayed Luggage Tracing  The AP will assist the Insured whose baggage is lost, stolen or delayed while traveling on a common carrier. The AP will advise the Insured of the proper reporting procedures and will help travelers maintain contact with the appropriate companies or authorities to help resolve the problem.

Replacement of Lost or Stolen Airline Ticket  One telephone call to the provided 800 number will activate the AP’s staff in obtaining a replacement ticket.

Technical Assistance

Credit Card/Passport/Important Document Replacement  The AP will assist in the replacement of any lost or stolen important document such as a credit card, passport, visa, medical record, etc. and have the documents delivered or picked up at the nearest embassy or consulate.

Locating Legal Services  The AP will help the Insured contact a local attorney or the appropriate consular officer when an Insured is arrested or detained, is in an automobile accident, or otherwise needs legal help. The AP will maintain communications with the Insured, family, and business associates until legal counsel has been retained by or for the Insured.

Assistance in Posting Bond/Bail  The AP will arrange for the bail bondsman to contact the Insured or to visit at the jail if incarcerated.

Worldwide Inoculation Information  Information will be provided if requested by an Insured for all required inoculations relative to the area of the world being visited as well as any other pertinent medical information.

Security Evacuation (Comprehensive)

Coverage (up to the amount shown in the Schedule of Benefits, Security Evacuation) is provided for security evacuations for specific Occurrences. To view the covered Occurrences and to download a detailed PDF of this brochure, please go to the following web page:

http://www.culturalinsurance.com/cisi_forms.asp
Cultural Insurance Services International – Claim Form

► Program Name: University of Florida - Study Abroad Programs
► Policy Number: GLM N04983920
► Participant ID Number (from the front of your insurance card):

Mailing Address: 1 High Ridge Park, Stamford, CT 06905 | E-mail: claimhelp@mycisi.com | Fax: (203) 399-5596 For claim submission questions, call (203) 399-5130, or e-mail claimhelp@mycisi.com Instructions:
1. Fully complete and sign the medical claim form for each occurrence, indicating whether the Doctor/Hospital has been paid.
2. Attach itemized bills for all amounts being claimed. *We recommend you provide us with a copy and keep the originals for yourself.
3. Approved reimbursements will be paid to the provider of the service unless otherwise indicated.
4. Submit claim form and attachments via mail, e-mail, or by fax (provided above).

► NAME AND CONTACT INFORMATION OF THE INSURED

Name of the Insured: ____________________________________________________________________

Date of Birth: _____/_____/_______ (month/day/year)
*Please indicate which is your home address: ☐ U.S. Address ☐ Address Abroad
U.S. Address: ________________________________________________________________

Address Abroad: __________________________________________________________________

E-mail Address: _____________________________________________________________
Phone Number: ____________________________

► IF IN AN ACCIDENT

Date of Accident: _____/_____/_______ Place of Accident: __________________________________ Date of Doctor/Hospital Visit: _____/_____/_______

Description/Details of Injury (attach additional notes if necessary):
____________________________________________________________________________
____________________________________________________________________________

► IF SICKNESS/ILLNESS

Description of Sickness/Illness (attach additional notes if necessary):
____________________________________________________________________________
____________________________________________________________________________

*Onset Date of Symptoms: _____/_____/_______ *Date of Doctor/Hospital Visit: _____/_____/_______

Have you had this Sickness/Illness before? ☐ YES ☐ NO If yes, when was the last occurrence and/or doctor/hospital visit? __________________________

► REIMBURSEMENT

Have these doctor/hospital bills been paid by you? ☐ YES ☐ NO
If no, do you authorize payment to the provider of service for medical services claimed? ☐ YES ☐ NO
If yes, any eligible reimbursements will be made in U.S currency (USD) via check. If you would like your eligible reimbursement in another currency via wire transfer, please contact CISI at 203-399-5130 or claimhelp@mycisi.com for instructions.

Please note if you are submitting a claim for prescription medication, you must submit the prescription receipt. This will include your name, the name of the prescribing physician, name of the medication, dosage, date and amount billed. Cash register receipts will not be considered for reimbursement.

► FOR CLAIMS RELATED TO TRIP INTERRUPTION:
In order to claim monies back related to the Trip Interruption Benefit, you MUST provide us with the following:
• Flight Itinerary including your name, travel dates and departure and arrival locations
• Letter stating reason for curtailing travel (if due to a medical condition, the letter must be from the treating physician)

Please provide us with the relevant details of your incident below or the details and value of your loss. You may attach an additional page if necessary:

__________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________

► CONSENT TO RELEASE MEDICAL INFORMATION

I hereby authorize any insurance company, Hospital or Physician or other person who has attended or examined me, including those in my home country to furnish to Cultural Insurance Services International or any of their duly appointed representatives, any and all information with respect to any sickness/illness or injury, medical history, consultation, prescriptions or treatment, and copies of all hospital or medical reports. A photo static copy of this authorization shall be considered as effective and valid as the original.

Warning: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

I certify that the information furnished by me in support of this claim is true and correct.

Name (please print) ____________________________________________________________
Signature ___________________________________________________________ Date ____________________________
**Documents**

**Apostille Certification**

All Faculty members going to Ecuador with Project HEAL need to provide to the trip leaders a copy of their license to practice and a copy of their diploma for their professional degree.

- These documents should be given to Shawn by early November (all documents at once) along with the $10 fee per document
- Shawn will get the documents notarized and then she will send them to the Florida Department of State to have an apostille stamps placed on the documents. An apostille stamp is an internationally recognized verification of authenticity used for documents.

http://notaries.dos.state.fl.us/notproc7.html

Division of Corporations
Clifton Building, Apostille Section
2661 Executive Center Circle
Tallahassee, FL 32301
Phone: 850-245-6945

The certification you receive from our office will not yet be an Apostille or Exemplified.

You will need to forward the certificate to the Florida Department of State, clearly stating that it is for certification as Apostille or Exemplified and what country it is for. The fee to the Department of State is $10 per certificate.

Once the documents have been returned to the trip leaders, the students should then retain these documents OR if requested by the in-country coordinator, they should send them to them by mid-January.

**Formulary**

Many countries are now requiring a list of the medicines in advance to be reviewed by the country’s Ministry of Health. The list must contain the following information:

- Medication name
- Dosage
- Quantity
- Expiration date
- Lot number

Universal formulary will be used by all trips as developed by the Formulary Committee. Changes to the formulary may be requested but depending on factors such as cost, in-country availability and recorded need from previous trips intake forms, etc. requests may be included, denied or substituted with a similar medication per Formulary Committee.

The Formulary Committee is comprised of Pharmacy and Medical students who have previously attended trips and so can provide insight into the endemic needs of the people in country.
Immunizations

Offering travelers country specific vaccinations and antibiotic prophylaxis not generally available at primary care practices, as well as health safety counseling. Whether your trip is for business or pleasure, we can help ensure you are protected.

Vaccines available:

- Hepatitis A
- Hepatitis B
- Hepatitis A/B Combo
- HPV
- Japanese Encephalitis
- MMR
- MMR-Varicella Combo
- Meningococcal
- Pneumococcal Polysaccharide
- Polio
- Rabies
- Shingles
- Tetanus/Diphtheria
- Tetanus/Diphtheria/Pertussis – Tdap
- Typhoid
- Varicella
- Yellow Fever

Appointments available Tuesdays. Self pay only.

For more information or to schedule an appointment, call 352.294.5480 or visit UFHealth.org/uf-health-travel-medicine.

PASSPORTS and VISAS

Please check your destination country’s passport requirements. Each country can set their own regulations as to who many enter their country and under what circumstances. Please check the United States Government Passport website at: [http://travel.state.gov/content/passports/english/country.html](http://travel.state.gov/content/passports/english/country.html)

For this example I chose Ecuador, I then expanded the view on “Entry, exit and visa requirements” to find out more about the requirements Ecuador has for visitors.

Please be sure your destination does not require a visa, just because it wasn’t required last year doesn’t mean the situation is static. You can check the US Government Passport website by destination and verify information with
your in-country hosts. Of importance, countries may restrict visas to citizens from foreign countries so if a visa is required please find out if your citizenship status is eligible for the visa by expanding the “Entry, exit and visa requirements”.

Learn About Your Destination

The State Department’s Office of American Citizens Services and Crisis Management (ACS) administers the Consular Information Program, which informs the public of conditions abroad that may affect their safety and security. Country Specific Information, Travel Alerts, and Travel Warnings are vital parts of this program.

We provide Country Specific Information for every country of the world. You will find the location of the U.S. embassy and any consular offices, information about whether you need a visa, crime and security information, health and medical considerations, drug penalties, localized hot spots and more. This is a good place to start learning about where you are going.

Also, please check the website for rules pertaining to Green Cards. Green cards may be needed when visiting your host country, be sure to take the original with you as a copy will not suffice. Again check the host countries requirements on the government websites. Any green card holder must carefully review requirements for travel to the foreign country including requirements based on their green card status for travel and re-entry to the U.S. and also regulations for travel to the foreign site based on their country of origin. Get help interpreting the rules ASAP if you are unsure.

6 Months Validity Rule

The Six Months Validity Rule is imposed by foreign countries, and not by the United States. It simply means that your passport should be valid for more than six months before you would be allowed to enter a foreign destination.

PLEASE NOTE the list of countries that require a 6 month validity rule may change.
Please check the US Government Passport website for the most updated information: http://travel.state.gov/content/passports/english.html/

Unexpected Circumstances

While we recommend students and faculty purchase traveler’s insurance, it is not required. Travel insurance may be able to help cover the expenses of unexpected circumstances such as sudden cancellations, accidental delays, missed flights or other unforeseen circumstances. In the event that you may experience a delay or unforeseen circumstance, some advanced planning may help. For example, having contact information for your lead faculty, trip leaders, in-country hosts, and the International Medical Education Office phone number.

To be better prepared for emergency situations while travelling you can reference this page: http://www.state.gov/travel/
CONTINGENCY PLAN

General Tips

- If you can, buy travel insurance! This is the single best thing you can do to protect yourself financially if you miss your flight. Even if you tack on the travel insurance offered by the airline at the time of your individual airline ticket purchase.
- Keep copies of your insurance and contact info card (below) with you. You can scan to home email, keep a photocopy with your passport, and be sure that it includes your hotel information and personal medical needs.
- Be sure to have ready cash for emergency expenditures, this can be the accepted currency of your destination country, Visa or Master card.
- Read the passport and visa requirements for your destination on the US Government Passport website while you are planning your trip, at least 6 months in advance of leaving, to be sure you have time to prepare for any passport or visa requirements that must be met. [http://travel.state.gov/content/passports/english/country.html](http://travel.state.gov/content/passports/english/country.html)
- Familiarize yourself with emergency procedures and contact information on the Department of State website: [http://www.state.gov/travel/](http://www.state.gov/travel/)
State-side

If you get separated from your group State-side call the trip leaders and lead faculty immediately, inform them of the situation. You may be able to re-group easily if you are simply in the wrong location with enough time to meet the group.

If you have missed the bus to the airport and still have time you may use an Enterprise Rental car to get to the airport. If there is an immediate availability you may still be able to rejoin the group but this is not guaranteed as with all rentals, it is dependent on availability.

Alternatively if you miss your flight for whatever reason but are still at the airport, please reserve an Enterprise Rental car and return to Campus. Call Shawn and she can reserve the rental car for you with her pcard. Your trips Foundation funds will then pay the pcard balance for the rental. Please note, any student that is using an Enterprise Rental car needs to be 21 years old or over.

Internationally

If you do not speak the language and are separated from the group and unable to regroup, seek uniformed officials only and ask for English speakers to help you.

If you miss a connecting flight in a foreign country or are separated from the group, again, call your trip leaders and lead faculty immediately. Try to re-group. If not, make your way to the terminal as best as you can, asking for assistance if necessary from uniformed airport employees. Try to contact the group to let them know you are on a later flight and be sure they can wait for you. If you will not be able to reconnect with the group take a flight back home. If you are unable to switch your ticket or have travel issues, contact the US embassy in that country for assistance.

Cash Advances and Reimbursements

All International Medical Education trips have to comply with the UF reimbursement and travel policies. To be reimbursed, you must supply Shawn with all receipts.

Please note it takes 1-2 weeks to get reimbursed if all documents provided are accurate and complete with clear documentation. Please make sure to sign and date the receipt. We would ask that all requests for reimbursement by students go through the trip leaders or the lead faculty.

Trip-related Travel Expenses

Students generally cannot be reimbursed for direct travel expenses (bus, air, food, and hotel). Only faculty and Student Trip Leaders can be reimbursed. Therefore, it is best to try to pay as many trip related expenses as possible in advance (e.g., flights, hotels). This is done by submitting contracts to Shawn with a month of lead time before the contract due date preferably to make the payment with the International Medical Education P-card (as long as funds are available in the trip account).

Travel expenses are covered in two additional ways

- **Cash advance (in advance)**: Lead Faculty can receive a cash advance, which can provide cash for the trip to use in-country. They need to submit a request for a cash advance with an outline of the anticipated budget. This is the way you get cash for in-country expenses. This should be done by November before leaving for Thanksgiving break as the Travel Services group requires **AT LEAST 6 weeks** lead time. *PLEASE NOTE: The lead faculty member **MUST** sign the cash advance request
form **BEFORE** the funds can be processed. Therefore cash advance must be **SIGNED** by lead faculty and returned to the Financial Services group by January 15th.

- **Bank transfer of funds** - In order to process a bank transfer of funds, please set up your vendor with the UF Financial Services Group as a foreign vendor (Shawn has the paperwork and can assist you with the process). Once your vendor is approved payments can be made by bank transfer which is a very quick and secure way of making payment for services. This is generally a good thing to set up with your long term in country host who can take a lump sum payment and pay local vendors from it, being sure to keep ALL receipts (or creating them) for each payment/service.

**Cash Advances**

- Please inform Shawn of cash advance needs in NOVEMBER and have signed cash advance forms returned to Financial Services by JANUARY. We don’t want our lead faculty to worry about taking money from their personal account or how to do so quickly after the money has been deposited. Give us plenty of time to process, deposit, and make funds available to lead faculty. Shawn just needs to know the dollar amount to process the paperwork. When the “Cash Advance Request” has been sent to the lead faculty for signature they MUST sign it and return it before the cash advance can be processed.
- To be sure funds are deposited to the correct account Lead Faculty should complete a direct deposit form and attached a voided check from that account, then give the form and check to Shawn to send to Financial Services.
- Lead faculty should NOT return funds until instructed to do so by Financial Services. There are often discrepancies between our figures and what Financial Services accounts for due to exchange rate differences. Once the expense report has been completed and a total due is given to the lead faculty member it is imperative to return the funds promptly as UF TRAVEL will garnish the lead faculty member’s wages for late repayments.
  - Lead Faculty and Student Trip Leaders can be reimbursed for expenditures with adequate documentation (e.g., receipts or justification).

**Cash Advances for in-country expenses**

The Lead Faculty member who received the cash advance is ultimately responsible for the reconciliation. So it is **IMPERATIVE** to turn in receipts immediately upon returning from the trip. Receipts can be photos of the original, a receipt such as the one provided earlier, or a letter on official letterhead stating the service, fee, date of service, location, amount, and currency type. All receipts must be in ENGLISH, same as contracts. Please see the excerpt below from the Financial Services website that explains about “Travel Advances”.

A. The University will authorize payment up to 100% of an approved Travel Authorization. In order to receive a travel advance, a traveler or travel originator must request the advance using the Travel and Expense Module. **Cash advances must be settled within 30 workdays** after the return to the official headquarters. The instructions on how to complete a Travel Advance form can be found on the Human Resources website.

B. Only university employees are eligible to receive an advance unless a grant specifically states otherwise. Current travel advance directives and procedures provide for the following:
   1. A traveler shall not have more than one advance at a time and Travel advances should be processed at least 10 workdays prior to start of trip. Requests for an advance more than 30 days prior will need a written justification of the circumstances which necessitate an exception to this restriction.
   2. The advance must be settled no later than 10 workdays from the travel ending date.
   3. If not settled within 30 workdays, UF can garnish a traveler’s wages through Payroll.
   4. The traveler may make payment arrangements for a garnishment deduction until the cash advance is settled completely.
   5. Prior to the 30 work days garnishment, the Travel Department will generate two email notifications regarding the unresolved outstanding debt to the traveler on or around the 10th and 20th workdays upon return to headquarters.
   6. If the travel advance results in payroll garnishment, then the traveler will not qualify for future travel advances.

C. Departments need to attach the signed Cash Advance Signature Page when submitting a Cash Advance request. The Cash Advance request will be sent back if one is not provided.