

2024-2025 Student Travel – Domestic Trip Information Worksheet

Name of Student Organization, Academic Group, or Individual _____

Title of Conference, Convention, Opportunity _____

Dates for Travel _____

Destination for Travel _____

List of Attendees (full names) _____

What will be your mode of travel to and from the destination?

- ☐ Vehicular Travel
- ☐ Air Travel
- ☐ Other _____

If air travel was selected above, please provide airline information below

Departure City _____ Departure Date _____

Airline _____ Flight Number _____

Return City _____ Return Date _____

Airline _____ Flight Number _____

Please initial by the statement below.

_____ I understand that it is encouraged, but not required, to secure Purdue University Travel Insurance for my domestic trip. If I want/need to obtain said travel insurance, I will contact the Office of Student Life and Leadership to review the policies and complete paperwork.

[For Student Organizations Only] **Please initial by the statements below.**

_____ I understand that all trip details are required to be entered into and approved in Suitable (Herd Hub) before my trip can occur.

_____ I understand that if my Suitable request is not approved, my student organization may not participate in the trip.

Sign below acknowledging that the information shared above is true to the best of your knowledge.

Signature _____ Print Name _____ Date _____