



UC San Diego

Policy & Procedure Manual

[Search](#) | [A-Z Index](#) | [Numerical Index](#) | [Classification Guide](#) | [What's New](#)

COVID-19 RELATED POLICIES

Section: 1-1 Supplement 1

Rescinded: 04/09/2021

Effective: 10/21/2020

Supersedes: New

Next Review Date: 10/21/2023

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Issuing Office: [Chancellor's Office](#)

Supplement 1

FORM FOR ESSENTIAL TRAVEL APPROVAL

Official business travel during the COVID-19 Pandemic must be pre-approved by the traveler's supervisor or unit head and Vice Chancellor. Travel arrangements should be made through the Concur Travel System, and registered with UC Travel Insurance.

Academic Personnel should follow the process available at <https://aps.ucsd.edu/faculty-resources/covid-19/travel-preapproval.html>; students and non-academic staff should complete this form, and obtain approval from their supervisor/unit head and Vice Chancellor.

Official travel must be categorized as ESSENTIAL for business operations.

ESSENTIAL TRAVEL is *both* mission critical to the unit AND enables activity that is impossible to conduct without travel.

Those requesting approval to travel must articulate the essential nature of the planned travel and the reason why this travel cannot be delayed.

Travelers should consult the [Travel During COVID-19 Information Hub](https://blink.ucsd.edu/travel/before/index.html) available at <https://blink.ucsd.edu/travel/before/index.html> to identify the safety requirements and restrictions in place in the location to which they plan travel.

Those engaging in Official University Travel must be prepared to work remotely and/or self-isolate upon their return to San Diego, as may be required by either County of San Diego or campus policy in effect at that time.

Name/email of Traveler: _____

Department of Traveler: _____

Department Head (Name/email): _____

Travel Destination: _____

Travel Dates: departure: _____ return: _____

Please explain why this travel is mission-critical to the unit: _____

University of California San Diego Policy – PPM 1 – 1 Supplement 1
PPM 1 - 1 Supplement 1 - Form for Essential Travel Approval

Please explain why the activities to be conducted cannot be conducted without travel (through Zoom, teleconferencing, or using personnel local to the destination):

Please explain why the travel cannot be delayed: _____

___ I agree to work remotely and/or self-isolate upon my return from travel if required to do so by County or Campus policy.

___ I agree to review and follow CDC guidance regarding safety procedures while traveling, available at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>.

___ I will take appropriate health precautions against infection while traveling, including wearing a face covering, frequent hand washing, and practicing social distancing from others.

Signature of Traveler: _____ Date: _____

Travel Sponsor/Unit Head/Supervisor Approval:

_____ Date: _____

Name: _____

Title: _____

Vice Chancellor Approval:

_____ Date: _____

Name: _____

Title: _____

Once completed, please attach this form to the Concur Travel Requisition

REVISION HISTORY

10/21/2020 New policy.

11/13/2020 Minor technical edits to update policy hyperlinks.

04/09/2021 Policy rescinded.