

2101 E. Broadway Road, Suite 4 Tempe, AZ 85282-1735

Toll-Free: 1-888-996-2326 Ph: (480) 907-7285 Fax: (480) 907-7526

E-mail: info@ocean-intl.org
Web: www.ocean-intl.org

TRAVEL AGENDA FORM FOR INTERNATIONAL TRAVEL

Students are prohibited from traveling outside of the U.S. unless they are traveling with their host family or on a school-sponsored trip. This trip MUST be pre-approved by OCEAN. For international travel, you MUST mail your original DS-2019 form to OCEAN's main office to be signed by the Responsible or Alternate Responsible Officer. This will indicate that you are still in good standing with OCEAN and will allow you to return to the U.S. upon completion of your trip. You are also responsible for researching the visa requirements for the country to which you will be traveling, as well as applying for the appropriate visa if required. This form must be submitted to OCEAN's main office at least 30 days prior to the intended date of travel. Students should not pay any fees related to their travels or finalize any travel arrangements until a trip has been pre- approved in writing by OCEAN.

Student's Name:					
Host Family's Name:					
Phone: ()	E-mail:				
Address:					
City:	State:	Zip Code:			
1 – Who planned the trip?					
2 – Where are you going?					
3 – With whom are you traveling?					
4 – Departure Date://	5 – Return Date: _				
6 – Where will you be staying? (Please	e provide the address and telep	hone number.)			
7 – Does your host family agree with y	our plans? □ Yes □ No I	f yes, please have then	n sign belov	N.	
Host Father's Signature:			Date:	/	_/
Host Mother's Signature:			Date:	/	_/
8 – Have your natural parents or legal	guardians authorized you to tra	avel? □ Yes □ No			
We, the natural parents agree to allow hold OCEAN responsible in any way fo is NOT responsible for any loss or injur	r the health, welfare and safety	of our son/daughter.			
Natural Father's Signature:			Date:	/_	/
Natural Mother's Signature:			Date:	/_	/

9 – Will you be absent from s	chool? □ Yes □ No			
If so, have you notified the so	chool of your absences? Yes No			
If you will be absent from sch	nool, we must receive written approval from a scho	ol official:		
School Official's Name and Ti	tle:			
School Official's Signature:		Date:	_/_	/
10 – Have you informed your	area representative of your plans? \square Yes \square No	If yes, please have him	/her sig	n below.
Area Representative's Name:				
Area Representative's Signati	ure:	Date:	/	/
will apply for the appropriate before making any of my tra	red to research the visa requirements of the count e visa if required. I must also acquire permission j wel arrangements. In addition, I understand that arture could result in my early dismissal from the	rom OCEAN's main offi traveling without recei	ce in A	rizona
Student's Signature:		Date:	_/	_/
Please return this form to:	OCEAN 2101 E. Broadway Road, Suite 4 Tempe, AZ 85282-1735			
	Toll-Free: Phone: 1-888-996-2326 Fax: (480) 907-7526 E-mail: info@ocean-intl.org			
**************************************	****************	*******	*****	*****
Option #1:				
OCEAN <u>approves</u> of the trip	outlined on this form and grants the student perm	ission to travel.		
Director's Name:	Title:			
Director's Signature:		Date:	/	/
Option #2:				
	f the trip outlined on this form. The student is NOT in this trip without the required authorization, he e country.	•		•
Director's Name:	Title:			
Director's Signature:		Date:	/	/