



Nunatsiavut Government – EDUCATION DIVISION

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Student Travel Request Form

Student Name: _____	Program: _____
Student #: _____	Institution: _____
Living Arrangements (while in training): Check one box per semester:	Mailing Address (while in training):
<input type="checkbox"/> renting/boarding	_____
<input type="checkbox"/> living with parents	City/Town: _____
<input type="checkbox"/> campus residence	Province: _____
<input type="checkbox"/> own home	Postal Code: _____
Primary Email Address: _____	Phone #: _____

Purpose of Travel:

- Graduation
 Graduation Guest
 Orientation Chaperone
 Extra Trip
 Licensing/Certification Exam
 Childcare Provider
 Alternate Mode of Transportation
 Alternate Travel Time (may include Childcare Provider or Spouse)
 Early Departure

- Graduation Guest**
 Orientation Chaperone
 Childcare Provider

Information (if applicable):

Name: _____	Date of Birth: _____
Email Address: _____	Phone #: _____
Travelling from: _____	Travelling to: _____
Departure Date: _____	Return Date: _____

Mode of Transportation: _____

(If driving, please complete the "Alternate Mode of Transportation Notification form")

Travel Disclaimer:

Student:

- I hereby certify that all expenditures claimed will be on Nunatsiavut business.
- I have attached a copy of my/our itinerary to this form.
- I understand that if my/our travel itinerary changes and I/we return early or leave late or do not go at all, I/we will repay the Nunatsiavut Government any balance owing from the advance.
- I HEREBY WAIVE, RELEASE, DISCHARGE AND AGREE NOT TO SUE the Nunatsiavut Government and its affiliates, successors, heirs, executors, and assigns from any and all claims including, but not limited to, claims for travel expenses, causes of action based on personal injury (including death) and damages to personal property, that I may have in the future against the Nunatsiavut Government and its affiliates, successors, heirs, executors, assigns, officers, employees, representatives and agents, which may result directly or indirectly from travelling with the student as their guest.

Signature: _____

Date: _____

Guest:

As a guest, travelling with: _____

I understand that:

- The Nunatsiavut Government-Education Division, will cover expenses related to my travel that include ground transportation (if driving *note: if flying, flights will be prepaid), accommodations (private &/or hotel), meals (according to NG rates), and taxi (only applicable for Orientation Chaperone & Bad Weather allowance).
- I HEREBY WAIVE, RELEASE, DISCHARGE AND AGREE NOT TO SUE the Nunatsiavut Government and its affiliates, successors, heirs, executors, and assigns from any and all claims including, but not limited to, claims for travel expenses, causes of action based on personal injury (including death) and damages to personal property, that I may have in the future against the Nunatsiavut Government and its affiliates, successors, heirs, executors, assigns, officers, employees, representatives and agents, which may result directly or indirectly from travelling with the student as their guest.

Signature of Guest: _____

Date: _____

For Office Use Only:

Approved: Yes No **Approved by:** _____ **Date:** _____

Amount deposited into Student account: _____

Amount deposited into Guest Account: _____

Is advance copy attached to this form: Yes No

Has guest bank information been provided: Yes No

Notes:
