

Completing the faculty-led emergency & liability forms for TTUHSC-OGH

- Access the forms at the following link: <https://app4.ttuhs.edu/facultystaffelform/>
- Sign in using your eRaider ID and password
- Select the *Faculty-Led Program for Students* option
- Basic information about the traveler will populate
- Select your trip from the drop down box. If it is not listed, select *None of the below*
- Complete forms A-F as directed below
 - Form A:
 - Select *Form A*
 - Provide any *Traveler Information* that does not populate
 - Select if a dependent will travel with you
 - Provide *Trip Information* to calculate number of days abroad
 - Select the number of countries you will travel to and provide country information
 - Upload your flight itinerary
 - Provide FOP, estimated cost, purpose of travel, justification/benefit, & name of faculty leading the trip abroad
 - Be sure to designate if travel will include work in a clinical setting
 - Read the section regarding insurance and print a copy of the insurance card to take with you abroad
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Traveler Information Sheet*
 - Generate a **Foreign Travel/Pre-approval Form** if needed by selecting *Foreign Travel/Pre-approval Form*
 - Select *Return to Packet Status* to complete additional forms
 - Form B:
 - If **no** dependents will be traveling with you, **skip Form B**
 - If a dependent will be traveling with you, select *Form B*
 - If dependents have traveled abroad with you before and are listed in the table, select the *Select* option and update information as needed
 - Be sure to include if the dependent needs insurance and if the dependent will be included on this trip. **This must be done for every dependent listed in the table so that OGH will know which dependents will be traveling abroad for this trip.**
 - **There are three sections to update:**
 - **Add/Edit Dependent Information**
 - **Waivers and Department of State Registration**
 - **Dependent Health/Emergency Treatment Authorization**

- Update all sections as needed, saving each section and providing digital signature as prompted
 - Select *Save Completed Dependent Record* when all updates have been completed
 - If you need to add a dependent who has never traveled abroad with you and who is not listed in the table, select *Add A Dependent*
 - Provide dependent's information
 - Be sure to include if the dependent needs insurance and if the dependent will be included on this trip
 - **Contact OGH for cost and payment information if you will purchase international health/medical evacuation insurance for the dependent**
 - Select *Create Dependent Info*
 - Scroll to next section and complete *Waivers and Department of State Registration* information
 - Provide dependent information
 - Upload copy of dependent's passport
 - Select *Save Changes to Dependent Waivers/Department of State Registration & Continue*
 - Scroll to next section and complete *Dependent Health/Emergency Treatment Authorization* information
 - If dependent is over age 18, print and complete hardcopy of form and return to OGH
 - If dependent is age 18 or under, complete information online
 - Select if dependent has *Medication/Drug Allergy*
 - If yes, provide additional information
 - Select if dependent has *Food/Environmental Allergy*
 - If yes, provide additional information
 - Select if dependent has *Current Medication*
 - If yes, provide additional information
 - Select if dependent has *Additional Concerns*
 - If yes, provide additional information
 - Read *Health And Emergency Agreement* and initial
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Dependent Emergency Treatment Authorization*
 - To print or save of copy for your records, select *View Dependent Record*
 - Select *Return to Packet Status* to complete additional forms
- Form C
 - Provide information for ICE contact 1 & 2
 - For any field you will not be completing, please type NA or none
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Release & In Case of Emergency*

- Select *Return to Packet Status* to complete additional forms
- Form D
 - Read Section 1 and select yes or no
 - Complete Section 2 by providing traveler & trip information
 - Include address abroad
 - Upload a copy of your passport
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Waivers/Registration*
 - Select *Return to Packet Status* to complete additional forms
- Form E
 - Provide any traveler information that doesn't populate
 - Select if you have *Medication/Drug Allergy*
 - If yes, provide additional information
 - Select if you have *Food/Environmental Allergy*
 - If yes, provide additional information
 - Select if you have *Current Medication*
 - If yes, provide additional information
 - Select if you have *Additional Concerns*
 - If yes, provide additional information
 - Read *Health And Emergency Agreement* and initial
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Emergency Treatment Authorization*
 - Select *Return to Packet Status* to complete additional forms
- Form F
 - Complete Form F if you qualify for funding through OGH
 - Provide any traveler information that doesn't populate
 - Provide *Trip Information*
 - Provide *Contact Person* information
 - Read the section about HSC OP 79.06 and initial
 - Electronically sign form by selecting *I Agree* radial button
 - Select *Save Request for Funding Information*
 - Select *Return to Packet Status* to complete additional forms

FINAL STEP!

- If you wish to print or save a copy of the forms for your records, select *View Traveler Information Sheet* and print or save
- If you need to route a *Foreign Travel/Pre-approval Form* for foreign travel approval, select *Foreign Travel/Pre-approval Form* and print
- After completing all forms, select *Select To Complete Forms*
 - If submission is successful, Packet Complete Date will update
 - If submission is NOT successful, error message will appear