



**Rotary International District 5020
Youth Exchange Program**



D 5020 – Travel Request Form

This form must be completed and submitted prior to travel.

Travel Request:

Student's Name: _____

Person Submitting Request: _____

Role of Person Submitting Request: _____

E-mail of Person Submitting Request: _____

Purpose of Trip: _____

Contact Information:

Responsible Adult with whom student will travel: _____

Cell Phone Number of Responsible Adult: _____

E-mail of Responsible Adult: _____

Student's Cell Phone: _____

Who else will be travelling on this trip: _____

Transportation

Vehicle Information (model/ color of car & license #): _____

OR

Carrier Information (airline/flight numbers): _____

Itinerary

Departure Date: _____ Date of Return: _____

COMPLETE Trip Itinerary:

Lodging (where student will be staying):

Other Comments:

***Our District requires this information so that we are ALWAYS able to locate the student quickly in the event of an emergency or an unexpected situation**