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## 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 provide the address and telephone number.)

7 – Does your host family agree with your plans?  Yes  No If yes, please have them sign below.

Host Father's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Host Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

8 – Have your natural parents or legal guardians authorized you to travel?  Yes  No

We, the natural parents agree to allow our son/daughter to participate in the trip outlined on this form. We will NOT hold OCEAN responsible in any way for the health, welfare and safety of our son/daughter. We understand that OCEAN is NOT responsible for any loss or injury suffered by our son/daughter during this trip.

Natural Father's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Natural Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

9 – Will you be absent from school?  Yes  No

If so, have you notified the school of your absences?  Yes  No

If you will be absent from school, we must receive written approval from a school official:

School Official's Name and Title: \_\_\_\_\_

School Official's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

10 – Have you informed your area representative of your plans?  Yes  No If yes, please have him/her sign below.

Area Representative's Name: \_\_\_\_\_

Area Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

***I understand that I am required to research the visa requirements of the country to which I will be traveling and that I will apply for the appropriate visa if required. I must also acquire permission from OCEAN's main office in Arizona before making any of my travel arrangements. In addition, I understand that traveling without receiving approval from OCEAN prior to my departure could result in my early dismissal from the program.***

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return this form to: OCEAN  
2875 W Ray RD Suite 6 #355  
Chandler AZ 85224  
  
Toll-Free: Phone: 1-888-996-2326  
Fax: (480) 907-7526  
E-mail: [info@ocean-intl.org](mailto:info@ocean-intl.org)

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**MAIN OFFICE USE ONLY:**

**Option #1:**

OCEAN **approves** of the trip outlined on this form and grants the student permission to travel.

Director's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Option #2:**

OCEAN **does NOT approve** of the trip outlined on this form. The student is NOT authorized to participate in this trip. If he/she chooses to participate in this trip without the required authorization, he/she may be dismissed from the program and returned to his/her home country.

Director's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_