

**APPLICATION TO TAKE AN INTERNATIONAL GROUP TRAVEL  
California State University Channel Islands**

Title of Trip \_\_\_\_\_

Faculty Sponsor \_\_\_\_\_

Name \_\_\_\_\_ Student ID \_\_\_\_\_

Address \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_

e-mail address \_\_\_\_\_

Passport number: \_\_\_\_\_ Date of expiration \_\_\_\_\_

(Note: passports must be obtained 45 days or longer before travel. In the event of an emergency, contact your Local Congressman or Senator.)

Are you currently enrolled at CSUCI? \_\_\_Yes \_\_\_No If not, are you currently enrolled in any college or university? (Give name, location, and dates of attendance)

\_\_\_\_\_  
**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**(Return to Faculty Sponsor)**