## Nunatsiavut Government – EDUCATION DIVISION



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## **Student Travel Request Form**

Student Name:			
Institution:		Program:	
Mailing Address (while	e in training):		
City/Town:			
Province:			
Postal Code:			
Email Address:		Phone #:	
Purpose of Travel:			
		rientation Chaperone 🗆 Extra Trip	
☐ Licensing/Certificati	on Exam    Childcare	Provider   Alternate Method of Travel	
☐ Alternate Travel Tim	ne (for Childcare Provider or Sp	oouse)	
		☐ Childcare Provider Information (if applicable):	
Name:			
Address:			
City/Town:			
Province:			
Postal Code:			
Email Address:		Phone #:	
Travelling from:		Travelling to:	
Departure date:		Return date:	
Method of Travel:			
Student Signature:		Date:	
For office use only:			
Approved by:		Date:	
Notes:			
	<del></del>		

## Travel Disclaimer Student: □ I hereby certify that the amount indicated above are correct and that all expenditures claimed will be on Nunatsiavut business. □ I understand that if the advance will be for a guest/chaperone, their amount will be deposited into my (the funded student's) bank account and I will forward my guest's share to him/her/them. □ I have attached a copy of my itinerary to this form. □ I understand that if my travel itinerary changes and I/we return early or leave late, I/we will repay the Nunatsiavut Government any balance owing from the advance. **Guest:** As a guest, travelling with: \_\_\_\_\_\_ I understand that: ☐ The Nunatsiavut Government (Education Division) has transferred funds to the Student to cover the 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 understand that it is the responsibility of the Student to transfer to me the funds given to the Student by the Nunatsiavut Government to cover the expenses related to my travel and that I will have no claim against the Nunatsiavut Government for any funds related to my travel with the Student. ☐ 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. Amount deposited into student account: \$ Student Amount Advanced: \$ Student Signature: \_\_\_\_\_ Guest Amount Advanced: \$ \_\_\_\_\_ Guest Signature (if applicable): \_\_\_\_\_\_ Date: \_\_\_\_\_ Verified by: Date: \_\_\_\_\_