

Complete this log for all health, safety or security incidents that occur on MU study abroad programs or university-related international travel.

Student name(s): _____

ID number(s): _____

Email(s): _____

Program name: _____

Incident type (e.g., hospital visit, theft, etc.): _____

Incident time/date and location: _____

Log completed by: _____

Description of initial incident and response:

1. Follow-up description (time, date, location, persons, actions):

2. Follow-up description (time, date, location, persons, actions):

3. Follow-up description (time, date, location, persons, actions):

Use multiple copies of for additional follow-up descriptions, as necessary. Email to globalhealthsafety@missouri.edu.