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| image\note.gif | * This form is to be used for travel outside the borders of South Africa. * UCT overseas travel insurance **does not cover private/personal travel**, and **these** **days** must be **noted separately** in [Section A](#personaldays). * **Section A:** Applies to UCT employees, accompanying spouses and children traveling on behalf of UCT. * **Section B:** **Only applies to UCT Employees.** * Avoid Insurer repudiations by **reporting** any **claim** **within 48hrs** of your return to SA. * No insurance cover is available for persons over 80 years. * A premium of R45/day is charged for **all students** traveling on UCT business. |

**INSTRUCTIONS**

* Complete a new INS02 form **each time you travel**.
* Complete this form electronically and return via e-mail to: [fnd-insurance@uct.ac.za](mailto:fnd-insurance@uct.ac.za?subject=INS02%20–%20Overseas%20Travel%20Insurance%20form)
* For instructions on how to complete and send this form correctly,
* please see: [How to complete the Overseas Travel Insurance form (INS02)](http://forms.uct.ac.za/ins02hlp.doc)
* If applying for a visa, ensure that this form reaches the Insurance Office at least 7 days before your visa appointment. See: [Schedule of benefits: AIG Business Travel Insurance](http://help.uct.ac.za/documents/Schedule_of_benefits_AIG_Business_Travel_Insurance.pdf).

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| **Section A: Personal details of traveler (Academic/PASS staff member)** | | | | | | | | | | | | | | | |
| Title |  | First name(s) | |  | | | | | | | | | | | |
| Surname | |  | | | | Staff number | | | | | |  | | | |
| RSA ID number | |  | | | | Date of birth DD/MM/YYYY | | | | | | /    / | | | |
| Nationality | |  | | | | Passport number | | | | | |  | | | |
| Department (full name, no acronyms) | |  | | | | E-mail address | | | | | |  | | | |
| Student number | |  | | | | Fund  (students) | | |  | | | Cost centre  (students) | |  | |
| **Overseas travel details** | | | | | | | | | | | | | | | |
| Destination | |  | | | Means of travel | | | Air | | | Road | | Rail | | Sea |
| Does any destination embassy require a letter for your visa application? | | | | | | | | | | | Yes | | No | | |
| If *Yes*, which embassy? | | |  | | | | | | | | | | | | |
| Date of departure | |  | | | | | Date of return | | |  | | | | | |
| Dates of UCT business | |  | | | | | Dates of Personal days | | |  | | | | | |
| Route | |  | | | | | | | | | | | | | |
| Reason for journey | |  | | | | | | | | | | | | | |
| Date | |  | | | | | | | | | | | | | |

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| **Section B: Work-related injury on duty while overseas (Academic/PASS staff member)** | |
| **IOD Procedure**  [ohs@uct.ac.za](mailto:ohs@uct.ac.za)  +27 021 650 2021 | * Any injury on duty (IOD) must immediately be reported to your Employer (UCT Line manager and Safety Manager). * The UCT IOD Procedure must be followed and all IOD Claim documents must be submitted to the UCT Safety Officeat [ohs@uct.ac.za](mailto:ohs@uct.ac.za). Contact the [Safety Manager](mailto:ohs@uct.ac.za?subject=Request:%20Copies%20of%20UCT%20IOD%20claim%20documents%20and%20UCT%20IOD%20procedure) for copies of the IOD Forms and the IOD Procedure. * **Any injury at a social event and any event where alcohol is served**, will **not** be covered by the COID Act. |

**Contact details:** Insurance Office, **Phone:** (021) 650-7237, **E-mail**: [fnd-insurance@uct.ac.za](mailto:fnd-insurance@uct.ac.za)