



Throughout the process of planning, we aim to recognise your independence in undertaking your time abroad. Students are expected to give due attention to the planning of their mobility especially regarding risks and personal safety. To facilitate this each student must submit a **Mobility Assessment** prior to travel.

This form has been designed as a prompt for students to ensure and record that you have appropriately considered your own needs, your travel arrangements, health (including public health) factors, local and regional conditions, and the study and/or work environment you are going to spending time in. Having insurance does not mean that you don't need to consider and manage your own risk in other ways.

The undersigned should pay close attention to current (at time of signature) advice from the following sources to ensure alignment with Government guidelines.

The current Government guidance is set out as:

- <https://www.dfa.ie/travel/travel-advice/>
- <https://www.dfa.ie/travel/assistance-abroad/security-ratings/>

1. Mobility Assessment Student Section

(to be completed by student)

1.1 Student Details

Student name	
Student ID	
Phone	
Email	
College	<input type="checkbox"/> Arts, Social Sciences & Celtic Studies <input type="checkbox"/> Business, Public Policy and Law <input type="checkbox"/> Medicine, Nursing & Health Sciences <input type="checkbox"/> Science and Engineering
Programme	
I have read and understood my responsibilities in the Student Declaration (see Section 3) including those around personal insurance cover as laid out in the student declaration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this activity a credit-bearing part of your study programme?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If a placement, what type of work will be carried out?	
In the event of an emergency, please indicate the name and phone number of who you would like us to contact:	

1.2 Proposed Travel Arrangements

Departure from (name of town/city)	
Anticipated Start Date	
Anticipated End Date	
Destination (names of town, city, region)	
Briefly describe your travel route and modes of travel (including dates and stopovers - <i>insert when known</i>)	
What is the Dept of Foreign Affairs and Trade travel status for the	

destination (e.g. Safe / Do not travel / Avoid non-essential travel)?	
My travel arrangements are compliant with official Government travel advice (at date of completion)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provide the address/contact for the Irish Embassy / Consulate responsible for the destination.	
I have/will register my travel and new residence with Dept of Foreign Affairs (Applicable to Irish Citizens only) (https://www.dfa.ie/travel/citizens-registration/)	<input type="checkbox"/> Will register <input type="checkbox"/> Already registered <input type="checkbox"/> N/A
Is a visa required for the country you're entering? Please check with the country's consulate/host institution	

1.3 Health Details

I have read and understood my responsibilities around health and my ability to cope with the challenges of work placement or study abroad as laid out in the Student Declaration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
In the case of any on-going or chronic illness, I have approval from my medical team, consultant or GP that I am fit to travel for work placement or study abroad and I will follow my medical team's advice	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable

1.4 Public Health/Risk Factors (as assessed by student)

Are there any local public health concerns such as infectious diseases of concern in the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes to the above, please include further details here	
Are there any official health guidelines or warnings regarding travel to the host location (issued	<input type="checkbox"/> Yes <input type="checkbox"/> No

by Irish or your destination countries authorities)?	
If you answered yes to the above, please include further details here	
I will make myself aware of and adhere to the local health guidelines at the host institution/company and in the host location/country.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have read the World Health Organisation guidelines for the host country.	<input type="checkbox"/> Yes <input type="checkbox"/> No

1.5 Location and Regional Factors (as assessed by student)

Are there any public safety, political and/or cultural factors (e.g violent conflicts or public protests) of concern in the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any official public safety guidelines regarding travel to the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Include further details if appropriate	

1.6 Study or Work Factors (as assessed by student)

If your host is relying on, or likely to resort to, remote learning or working, are you satisfied that they can adequately meet your programme requirements in terms of learning objectives and experience can be met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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1.7 Any Other Risks

Are there any conditions or features of this placement or study abroad that should be taken into account?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide further details	

2. MOBILITY ASSESSMENT COLLEGE SECTION

(to be completed by College)

2.1 Placement or Study Abroad Details

Start date	
End date	

2.2 Host of Placement or Study Abroad

Type of placement or study abroad	<input type="checkbox"/> Erasmus study abroad <input type="checkbox"/> Erasmus traineeship <input type="checkbox"/> Other study abroad <input type="checkbox"/> Work placement <input type="checkbox"/> Other (describe)
Host organisation	
Address/Country	
Contact person at host	
Contact person position/role	
Contact person email and phone	
Please provide evidence of previous experience(s) with host organisation, if known	

2.3 Student Preparation

Selection procedure completed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pre-departure information provided	<input type="checkbox"/> Yes <input type="checkbox"/> No
College contact points provided	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mentoring plan in place	<input type="checkbox"/> Yes <input type="checkbox"/> No
Student contact information received	<input type="checkbox"/> Yes <input type="checkbox"/> No
Student emergency contact information received	<input type="checkbox"/> Yes <input type="checkbox"/> No

2.4 Study or Work Conditions

Do the overall working or study conditions satisfy guidelines recognised for an appropriate company or university? (refers to 1.6 in student section)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has an up-to-date workplace assessment / CDC Organisational Assessment been carried out?	<input type="checkbox"/> Yes <input type="checkbox"/> No

When was the last visit to the host carried out, if any? Was there pertinent feedback recorded to inform this assessment?	
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2.5 Student Medical and Support Services

Are appropriate medical services available to the student at the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are appropriate support services including for counselling and other concerns available at the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No

2.6 Public Health Factors

Are there any public health factors such as infectious diseases of concern in the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any official health guidelines regarding travel to the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Include further details if appropriate	

2.7 Location and Regional Factors

Are there any public safety political and/or cultural factors of concern in the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any official public safety guidelines regarding travel to the host location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Include further details if appropriate	

2.8 Any Other Risks

Are there any conditions or features of this placement or study abroad that should be taken into account?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Include further details if appropriate	

Prepared and Reviewed by Student

Name:

Signature:

Date:

Reviewed by Programme Coordinator

Name:

Signature:

Date:

Mobility Approved by Dean of College

Name:

Signature:

Date: