EXAMPLE 1 Student Pre-Departure and Personal Safety Orientation
Student Name:
CETUSA Student #:5 digit number
Student Signature:
Date of Pre-Departure and Safety Orientation: / / / //
Location of Orientation:
Who presented the Orientation: Please Print Name
Title/Position:
/ /
Signature of person from organization MM DD YYYY
Organization Name:
Council for Educational Travel USA HSP Office 678 Front Ave. NW Suite 091A Grand Rapids, MI USA 49504 Phone: 616-365-9940 Fax: 616-365-9941
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