

# Foreign Travel Itinerary Registration Form

**Privacy Notice:** State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge. To request this information, contact [esc@tamu.edu](mailto:esc@tamu.edu) or (979) 845-4141.

**INSTRUCTIONS** This form is used to track university administrators, faculty and staff who travel to international destinations on official university business or university sponsored trips. The information disclosed on this form may be used by the university to coordinate assistance services should circumstances require it. Inclusion of personal travel legs, if applicable, is recommended but is not required. Please include any information about driving legs of a trip in the 'Additional Comments' section below. **Use as many forms as needed to record all legs of university business travel, including accommodation arrangements, over the duration of the travel.** The original Foreign Travel Itinerary Registration Form must be submitted to Contract Administration prior to trip departure. A copy of this form should be attached to the request for reimbursement to FMO.

Traveler's Last Name	Traveler's First Name	Traveler's UIN
Phone Number	Email	Today's Date

Date of Departure from U.S.A				Date of Return to U.S.A		
Travel Leg #	Date	Departure Airport Code* <small>(3-letter code)</small>	Arrival Airport Code* <small>(3-letter code)</small>	Airline Name	Flight #	Total number of People in Travel Party

\*Not required if airline itinerary is attached

\*Note: Use the airport's 3-letter code for airports (see <http://www.world-airport-codes.com/> if you do not know the airport codes).

Contact Information				
<input type="checkbox"/> I will carry a cell phone that is operational abroad with me at all times		Cell phone number		
The following person will be informed of my whereabouts during this trip at all times:				
Name	Relationship	Contact Phone Number	Location	Contact E-mail Address

Hotel or Lodging		
Name	Main Phone #	Alternate Contact Phone
Address		City/Country
Additional Comments:		
Meeting Hotel or Conference Center – If you will be participating in activities, meetings, etc. located in a different hotel or facility than the one in which you will be staying, please list the following facility information:		
Facility Name		
Address		
Main phone number	Name or group of organization meeting at facility	

<b>SUBMIT ORIGINAL FORM:</b> Contract Administration MS 1182 Fax (979) 862-7130	<b>NEED HELP?</b> Lori Mervish (979) 845-0099 <a href="mailto:lmervish@tamu.edu">lmervish@tamu.edu</a>
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