

Foreign Travel Request Form

*Complete this form in its entirety and submit as a Word file* ***45 days prior to your departure*** *to Stefanie Johnston at* *Stefanie.Johnston@inl.gov**. Contact NEUP at (208) 526-1197 with any questions.*

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| **Traveler Information** |
| **Responsible Program Office (at HQ), if overhead travel responsible program office is NE.** | Nuclear Energy University Programs (NEUP)Mike Worley |
| **Traveler Name (Last, First, Middle)** | Last, First, Middle |
| **Social Security Number** | XXX-XX- Last 4 Digits [ ]  I do not have a SSN |
| **Passport Number** |       Exp Date mm/dd/year |
| **Gender** | [ ]  Male [ ]  Female |
| **Citizenship** | a) First Countryb) Second Country |
| **Permanent Resident Green Card Holder** | [ ]  Yes [ ]  No |
| **U.S. Visa** | Visa Type       Expiration Date      Not Applicable [ ]  |
| **Employment Information** | Name      Position Title      Street Address      City       State      Zip       Country       |
| **Contact Information** | Home Telephone      Cell Phone      Email Address      Work Phone      Work Fax       |
| **Section II. General Trip Information** |
| ***Use additional pages as necessary. Account for all funding types estimated for this trip request.*** |
| **Place of Departure** | City       State/Province      Country       |
| **Departure/Return Date** | Depart: mm/dd/year Return: mm/dd/year |
| **Estimated Total Travel Costs** | $      Airfare $        Other $        |
| **Project ID Number** |       |
| **Charge Number/B&R Code** *(NEUP will enter.)* |  |
| **Benefit to Government:** Describe how you will use the information, etc. that you gain from the trip to benefit your present position, division, INL, and DOE HQ programs. Avoid a description of the trip itinerary.  | Describe Benefit Here |

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| **Section III. Trip Itinerary** |
| *Use additional pages as necessary. Account for the entire time between departure and return. Complete a separate itinerary for each city/country to be visited and for each personal or leave period. (DOE allows only 2 personal days associated with foreign business travel.)* |
| **Is this part of the trip associated with a conference?** | [ ]  Yes [ ]  No*(If yes, provide the information below.)*Conference:      Sponsor:      Contact URL:       |
| **Destination (Country, City)** | Country, City |
| **Start Date** | mm/dd/year |
| **End Date** | mm/dd/year |
| **Select One or More Primary Purposes** | [ ]  Professional Conference or Workshop[ ]  Seminar/Symposium[ ]  Working Group or Colloquia (Scientific Meeting)[ ]  Site Visit[ ]  R&D activities under an informal, lab-to-lab, or government-to-government agreement[ ]  Meeting(s) on scientific, technical, project or programmatic matters[ ]  Procurement-Related Matters[ ]  Official Stop Over[ ]  Personal Leave[ ]  IAEA Travel[ ]  LDRD Project Work[ ]  Permanent Change of Station |
| **Technical Justification:** Describe what you will be doing while on travel; be specific and as detailed as possible. | Describe Justification Here |
| **Host/In-Country Contact Information** | Name      Affiliated Institution      Phone       |
| **After Hours/Hotel Information** | Name      Phone       |