

DEPLOYMENT TRAVEL REQUEST WORKSHEET (TRW)

(for ASC fulltime deployments)

This form should be returned eight (8) weeks before the scheduled departure date.

All tickets must be purchased a minimum of fourteen (14) days in advance.

Please complete and return to:

Antarctic Support Contract
Attn: ASC Travel
7400 South Tucson Way
Centennial, CO 80112-3938

Fax: 303-705-0742
Phone: 800-688-8606 ext 33202
303-790-8606 ext 33202

Today's Date: _____

POC/Supervisor: _____

ASC Charge Code: _____

Other Charge Code: _____

Please print clearly

Name: _____

(*exactly as it appears on passport*)

Title: _____

Teammate: _____

Airport of Departure: _____

Closest major airport

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Email: _____

FedEx Delivery Address (P.O. Boxes not accepted): _____

Purpose of Trip/Comments: _____ Deployment to: _____

REQUESTED TRANSPORTATION ARRANGEMENTS: (YOU MUST PROVIDE RETURN DATE EVEN IF APPROXIMATE)

| From City/State and/or Airport | To City/State or Country | *Date | ETD Earliest/Latest | ETA Earliest/Latest | Seating Requests | Special Meal Requests |
|-----------------------------------|-----------------------------|-------|------------------------|------------------------|---------------------|--------------------------|
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AA Frequent Flyer #:

Obtain any necessary visas before leaving the U.S. by contacting the embassies of the countries to be visited. Failure to do so may complicate or delay your travel. The U.S. Antarctic Program does not pay for or provide assistance in obtaining visas.

Vessel Departure Date: _____ Cruise #: _____

Arrival Date at McMurdo Station: _____

Arrival Date at South Pole Station:* _____

*Arrival dates must be coordinated with the South Pole Asst Area Manager

Arrival Date at Palmer Station: _____

*Allow a minimum of four (4) days prior to requested date of departure to Antarctica for travel time from AOD to Christchurch, NZ and three (3) days prior to requested date of departure to Antarctica for travel time from AOD to Punta Arenas, Chile, or vessel departure date.

All travel arrangements are made in accordance with the Federal Acquisition Regulations (FAR) and in the best interest of the U.S. Government.

HOTEL PREFERENCES:

Check in date: _____ Check out date: _____

Christchurch: Hotels in Christchurch are assigned.

Punta Arenas: Cabo de Hornos

Diego de Almagro

Dreams

Jose Nogueira

Rey Don Felipe

straight to vessel

Smoking Room Non-Smoking Room

NO HOTEL REQUIRED - Local contact phone number: _____

Any Personal Time? Non-Programmatic dates: _____

TDY in Christchurch? Must be pre-approved (CHC-FRM-0001). TDY Dates: _____

Supervisor's Signature/Date: _____ Director's Signature/Date: _____

