

GRANTEE DEPLOYMENT TRAVEL REQUEST WORKSHEET (TRW)

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

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

Please complete and return to: Raytheon Polar Services Attn: Deployment Specialists Group 7400 South Tucson Way Centennial, CO 80112-3938	Fax: 303-705-0742 Phone: 800-688-8606 ext 2 303-790-8606 ext 33202 Email: deployment@usap.gov	RPSC POC: _____ Principal Investigator: _____ Event #: _____ AA Frequent Flyer #: _____ Other FF #s: _____
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<p style="text-align: center;">Please print clearly</p> Name: _____ Exactly as it appears on passport Airport of Departure: _____ Closest major airport (Airport/City/State) Need transportation to airport? YES <input type="checkbox"/> NO <input type="checkbox"/> Emergency Contact Name and Phone Number: _____ _____ _____	Home Phone: () _____ Business Phone: () _____ Cell Phone: () _____ Email Address: _____ FedEx Delivery Address (P.O. Boxes not accepted): Is this a residential address? YES <input type="checkbox"/> NO <input type="checkbox"/> _____ _____ _____
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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
			:	:		
			:	:		
			:	:		
			:	:		

Any necessary visa should be obtained 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: _____ 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.
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All business stops must be approved by the NSF in advance of ticketing. If stops are required, please provide an explanation. Any personal stops en route must be coordinated directly with the airline, and any additional costs incurred due to personal stops will be the traveler's responsibility. **Excess Baggage costs are no longer reimbursed by RPSC – please review your airline's website prior to flight to ensure you are prepared to pay any associated costs.** The USAP Participant Guide provides further instructions regarding excess baggage. If you plan to transport high value/high tech items through New Zealand, RPSC DSG will provide you with an original, individually assigned New Zealand customs form for your items. Contact RPSC DSG for further instructions at 800-688-8606 ext. 2 or 303-790-8606 ext. 33202.

HOTEL REQUESTS: (Christchurch, NZ, and Punta Arenas, Chile hotel suggestions are listed on the Hotel List: RPSC form DS-A-100d)

Check in date _____ Check out date _____

Christchurch, NZ
 Punta Arenas, Chile
 Other (include phone) _____

1st Choice of Hotel _____ Willing to Dorm? Yes No

2nd Choice of Hotel _____ Willing to Dorm? Yes No

No Hotel Preference
 Smoking Room
 NON-SMOKING Room

Roommate(s): _____ Single
 Twin Beds
 Double

NO HOTEL REQUIRED Local contact phone number if no hotel required _____