## **Travel Planning Request Form**

## National Center for Pavement Preservation | If you have questions, please feel free to call us at 517-432-8220

Name of Meeting:

After completing the form, return it to NCPP: Save, attach, & send in an email to ncpp@egr.msu.edu Please submit the following information with regard to your travel to/from the meeting.

Full Name:		FULL name as it appears on your Drivers License or Passport - <u>MUST</u> include middle name / initial if it appears on your ID.
Date of Birth (required for air travel)		
Email Address:		
Work Phone:		Cell Phone:
Address to which reimbursement is to be sent:		
City, State, ZIP Code:		
Ve are required to submit emergency contact information for every traveler.  Please provide below the name and ontact information for someone who can be contacted in case of an emergency during your travel with us:		
Name:		Cell / Home phone:
Email Address:		Relationship to traveler:
Please select one of the following modes of travel to/from the meeting / event:		
Riding with another meeting / event attendee. Person driving:		
Driving Address from which you are departing:		
Flying	Best <u>Departure</u> Date / Time:	
	Preferred Departure Airport:	
	Best Return Date / Time:	
	Preferred Airline(s) / Frequent Flyer Numbers:	
Lodging Check In & Check Out Dates:		
If you have researched the available flight options and would like to submit your preference, please include the flight information in the box below. We are limited by financial constraints (as are most organizations during the current economic times), and so we will explore the most economical travel that fulfills your needs. We will do our best to fulfill your request.		

Preferred Itinerary: