Date First Effective: 07/01/22 Revision Date: 09/12/23

Appendix B: HF Travel Arrangement Request Form

Use this form if you hold a non-benefitted position or are ineligible for a travel card

Contact Information Suffix: Title: Name (exactly as it appears on your travel identification) (First, Middle, Last): Email Address: Date of Birth: **Contact Phone Number:** Preferred Airline: Preferred Seat Location: Airfare Layovers (max): Known Traveler Number: DHS Redress Number: Frequent Flyer Number: Global Entry/NEXUS/Sentri Number: Departure Date: Earliest Time: Latest Time: Preferred Departure/Return Airport: Checked Carry On Bags: Bags: Return Date: Earliest Time: Latest Time: **Preferred Destination Airport:** Travel Information Any special circumstances? (refundable ticket, multiple travelers, combined business/personal travel, etc.) Yes* * If yes please describe in Additional Details Preferred Lodging Establishment (name and city or website): Lodging Type: Lodging Check-in Date: Rewards Number: Check-out Date: Adults: Children: Preferred Room Type: Transportation Please note: Some transportation methods may require an out of pocket expense to you up front but you can be reimbursed after your travel. Additional Details (from above and/or other details the travel arranger should know): Additional Details Yes Travel Arranger's Initials: Completed? No

Comments:

Fly America Act? No Yes

International?

Open Skies? No Yes

No

Yes