

# Request for Official OCONUS Temporary Duty Travel

Date

(ALL BLOCKS MUST BE COMPLETED)

<b>TO:</b> Commander USA Training and Doctrine Command Attn: ATBO-BPS Fort Monroe, Virginia 23651-5000	<b>THRU:</b> (Installation/Activity OCONUS Program Manager)	<b>FROM:</b> (Requester's section and AUTOVON Number)
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1. Traveler(s): (Indicate name, SSN, rank/grade, title, organization/installation/activity to which assigned, office symbol of traveler, security clearance, citizenship, date and place of birth, date and place of naturalization, if applicable, and country to be visited.)

2. Purpose of Visit:

Facility/Location of Conference/Meeting:

3. Travel directed by:

POC:

4. Date and nature of INVITATION on which visit is based, if applicable:

- Travel/country clearance has been granted per:
- Travel/country clearance has not been granted.
- If travel/country clearance requested by another MACOM, identify message requesting clearance:

5. Proposed itinerary: (Include day-by-day itinerary with estimated dates of arrival and departure, UNITS TO BE VISITED.)

6. Alternate visit dates if visit cannot be accommodated at preferred time:

7. Will trip involve:

YES NO

a. Meeting with foreign personnel? If so, identify as outlined below.

b. US Embassy personnel? If so, identify as outlined below.

If Yes to either of the above, indicate name, grade and position of key personnel to be visited.

8. Will trip involve:

YES NO

Disclosure of classified information and, if disclosure to foreign nationals is proposed, indicate the security classification of material and authority for disclosure.

9. Local support desired (Check appropriate blocks):

- Hotel accommodations       Transportation       Briefings       Other
- Classified courier requirements       Security guards for aircraft       Onward Bookings
- Requested by other means

10. If request is submitted less than 60 days prior to departure date, state the reason for late submissions and furnish complete justification why trip cannot be conducted at a later date. (If additional space is needed, continue in remarks column)

11. Point of contact for trip. (Indicate name, rank, organization, office symbol, and AUTOVON number)

TRADOC Installation/Activity:

Overseas (HQ USAREUR/HQ EUCOM):

Staff Action Office HQ TRADOC:

Any other:

12. Classified material (AR 380-5)

YES NO

a. Will traveler be handcarrying classified material while in travel status?

b. Approval to handcarry classified material must be obtained from the Local Security Official.

13. Remarks: (use this item for continuation of items requiring additional space. Separate sheet of plain bond paper may be used and attached to this form if necessary. Continuation must be cross-referenced by item number.)

14. Typed name, grade and title of authenticating authority:

15. Signature: