



Pennsylvania Urban Search and Rescue Task Force Travel Authorization Form



Department # 13 Index # _____ Class Code 200 Date _____

Reason for Trip: _____

Travelers Name: (Exactly as it appears on Drivers License)

Last: _____ First: _____ MI: _____ DOB: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell: _____

E-Mail: _____ Task Force ID / Payroll #: _____

Transportation Request

Form of Transportation: AIR _____ RAIL _____ BUS _____ Desired Departure Time (circle one)

Departure: Date: _____ From: _____ Morning - Afternoon - Evening

Destination: _____ Desired Departure Time (circle one)

Return: Date: _____ To: _____ Morning - Afternoon - Evening

Hotel / Rental Car Reservations

Hotel Name: _____ #Nights _____ Car Rental Requested: _____

Room Preferences: Smoking _____ Non-Smoking _____ King Size bed _____ Double bed _____

Travel Booked

Outbound Flight / Train / Bus # _____ Departure Time _____ Arrival Time _____

Return Flight / Train / Bus # _____ Departure Time _____ Arrival Time _____

Hotel Confirmation # _____ Car Confirmation # _____

Flight / Train / Bus \$ _____ Hotel/Nights \$ _____ Car/Day \$ _____

Date Tickets are to be issued / delivered: **As Soon As Possible**

APPROVED _____
(Travel Coordinator)

APPROVED _____
(Authorized Signer)