



Travel Request Form

	PASSENGER NAME	RELATIONSHIP TO EMPLOYEE	AGE OF CHILDREN
1	→	→	→
	→	→	→
	→	→	→
	→	→	→

2 EMPLOYEE'S ID #: _____ SENIORITY DATE: _____ Employee's Location: _____

EMPLOYEE'S POSITION: _____ TELEPHONE #: () — —

ADDRESS FOR FEDEX DELIVERY
 CITY: _____ State _____ Zip _____

3 **PLEASURE TRAVEL** - ✓ TYPE OF NRSA DISCOUNT REQUESTED AND PLEASE ALLOW **5** BUSINESS DAYS TO PROCESS

ID-90 ID-95 ZED FARE SERVICE CHARGE

EMERGENCY REASON FOR EMERGENCY TRAVEL _____

4 **PAYMENT**

EMPLOYEE CHECK OR MONEY ORDER (ATTACH PERONAL CHECK OR MONEY ORDER FROM ACTIVE EMPLOYEES ONLY)
 ONLY CAN BE USED FOR SOUTHWEST TICKET REQUESTS

CREDIT CARD TYPE OF CREDIT CARD AMERICAN EXPRESS MASTER CARD VISA DISCOVER

PERSON'S NAME AS IT APPEARS ON CREDIT CARD _____

CREDIT CARD NUMBER _____ Expiration Date: _____

AUTHORIZATION SIGNATURE _____ C V V # _____

5 **COMPANY BUSINESS TRAVEL**

ZW-NRPS UA-NRPS

US-NRSP NW COBUS

PURPOSE OF MEETING: _____

PERSONS ATTENDING AFFILIATION: _____

AUTHORIZED BY: _____

6 **ITINERARY:** **COBUS TRAVEL PNR NUMBER** _____

a	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____
b	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____
c	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____
d	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____
e	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____
f	FROM: _____	TO: _____	DATE: _____	AIRLINE: _____	FLIGHT: _____

7 PICK UP AT STAFF TRAVEL OFFICE MAIL – INCLUDE SELF-ADDRESSED, STAMPED ENVELOPE

SEND FEDERAL EXPRESS – ACCEPTABLE FORM OF PAYMENT: CREDIT CARD E-MAIL COBUS TRAVEL ITINERARY TO: _____

EMPLOYEE'S SIGNATURE: _____

DATE RECEIVED BY PASS BUREAU: _____

DATE SIGNED BY EMPLOYEE: _____

DATE RETURNED TO EMPLOYEE: _____

Questions? Call ATW Staff Travel Office at 1.800.292.2367 (Enter 2922, then x6350).

Fax signed, completed form to 920.749.7698.

Allow ONE week for processing Pleasure Travel Requests