# **Travel Profile Form**

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| --- | --- | --- |
| Personal Information | **NAME AS IT APPEARS ON PASSPORT** | Surname:First name:Middle: |
| **Date of Birth (XX/XX/XXXX) and Gender** |  [ ]  M [ ]  F |
| Business phone |  |
| Mobile phone |  |
| FAX Number |  |
| E-mail Address |  |
| Complete Business Address |  |
|  |  |
| Passport**(Please provide a scanned or fax copy)** | Country of birth |  |
| **NAME AS IT APPEARS ON PASSPORT** |  |
| Country of citizenship |  |
| Passport Number/Passport Issued |  |
| Expiration date |  |
|  |  |  |
| Preferred Dates of Travel  | Date of travel |  |
|  |  |
| Return date of travel |  |
|  |  |
| Traveler Frequent Flyer Number & Airline |  |
|  |  |  |
| Preferred Airport for departure and country routed through | Airport to depart from |  |
| Country preferred to be routed through |  |
|  |  |
|  |  |
|  |  |

**PLEASE** FAX (412-641-6170) or e-mail your completed travel profile to Cheryl Richards (crichards@mwri.magee.edu.)