

## FOREIGN TRAVEL - OPAR

If the form is missing any information, country clearance will not be granted.

Please be aware on the form (common missing information):

1. Part D, Personal Information
  - a. Must have International Cell Phone number, cannot use hotel information, if traveler does not have an international cell phone, then traveler must request a burner phone through the department and the phone must be kept with them at all times during international travel.
  - b. Security Clearance Level – None (most MWA/ARS travelers will be None)
2. Part E, 24/7 US Emergency Contact Information
  - a. Must include phone number **AND** email address of emergency contact
3. Part H, Travel Itinerary
  - a. Must match Departure Date, Arrival Date (in country) and Return Date with the information in Part K
4. Part I, US Office Contact Information
  - a. **Form states** – USDA Agency/US Contact Name/Address/Phone/Fax Number/Email Address
  - b. **MUST** include all information as stated, cannot use just Name/Phone/Email Address
5. Part J, In-Country Contact Information
  - a. **Form states** – Name/Business/Agency Affiliation/Address/Phone/Fax/Email Address
  - b. **MUST** include all information as stated, cannot use just Name/Phone/Email Address
  - c. **MUST** be someone “in-country”
    - i. if conference is in Italy and being hosted by someone in Michigan, USA, cannot use Michigan for the “in-country” contacts
    - ii. **MUST** be someone “in-country”
6. Part K, Transportation Information
  - a. **MUST** include ground transportation, i.e. Taxi/Uber/Shuttle/Host Vehicle

# Official Passport Action Request

## Part A Action Requested (REQUIRED)

New Passport  
  Passport Renewal  
  Visa(s)  
  Country Clearance(s)  
  Other

## Part B Employee Information (REQUIRED)

Name of Traveler: <i>(First Name Middle Name Last Name, Suffix)</i>	Date of Birth: <i>(mm/dd/yyyy)</i>	Place of Birth: <i>(City, State or Country)</i>	
Official Title of Traveler:	Grade:	Social Security Number:	
Agency & Area Name:		City:	State:

Business & Personal Email Address:

## Part C Official Passport Information (REQUIRED Exception New Passports)

Official and/or National Passport Number:	Expiration Date:
UPS TRACKING INFORMATION FOR PACKAGES TO FMAD-TRAVEL	Tracking Number:

## Part D Personal Information (REQUIRED)

Male    Female  
 Marital status:  
  Married  
  Single  
  Divorced  
  Seperated  
  Widow(er)

Home Address:

City, State Zip Code:

Business & Home Phone Number:

**International Cell Phone:**  
*(Required for Country Clearance)*

Security Clearance Level:  
*(Required for Country Clearance)*

Date Security Clearance  
 Obtained:

## Part E 24/7 US Emergency Contact Information (REQUIRED) (Family member or friend)

Name:	Relationship:
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Address:

City, State Zip Code:

Phone Numbers (Home / Cell / Work) and Personal Email Address

## Part F Purpose of Visit (REQUIRED)

Conference: <input type="checkbox"/> Yes <input type="checkbox"/> No	Conference Name:
Mission Trip: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name:
Participation:	Presenter                   Instructor                   Student                   Collaboration                   Other = Mission funded
By other:   Yes <input type="checkbox"/> No	Who?



