

From: [Hughes, Karen - ARS](#)
To: [ARS-MWA-Travel Coordinators](#)
Cc: [Anderson, Scott - ARS](#); [McGraw, Barbra - ARS](#)
Subject: OPAR Form with Required Part M 12.20.2022
Date: Tuesday, December 20, 2022 1:31:14 PM
Attachments: [image001.png](#)
[image002.png](#)
[image006.png](#)
[OPAR_Form_with_Required_Part_M_12.20.2022.pdf](#)
[image010.png](#)
[image007.png](#)
[image008.png](#)
[image009.png](#)

Good Afternoon All,

I have updated the OPAR form to meet our needs specifically when requesting passport renewals, seems to be some confusion.

The correct form is titled **OPAR Form with Required Part M 12.20.2022**, as attached.

Please delete all other OPAR forms that you have saved. Please delete all OPAR A and OPAR B forms, these are being replaced by the attached.

On this form I have marked all blocks in "red" that are required to be filled out for a passport renewal/issuance. Currently, forms going to FMAD are missing some sections, reason for update.

For passport renewals/issuances information-OPAR blocks must be completed, these are now a required field and will not let you move forward unless information is entered.

1. Part A
2. Part B
3. Part C, either government passport information (preferred) or personal passport information, if no passport please place "None" in the field to move forward
 - a. Airbill of passport moving forward to FMAD
4. Part D
5. Part E
6. Part F, Purpose of Visit/Project Description, please just two sentences to describe the purpose.
7. Part I, This information is the Location person, travel arranger, **MUST include address**

This does not replace all the other information needed on the form to complete a Visa request or Country Clearance (eCC)

Reminders!

Part H, added to form

1. Departure Date from the United States,
2. Arrival Date to the country visiting, some countries, traveler will arrive on the next business day,
3. Return Date to the next country or the United States, Next country would apply if traveler is visiting two countries in one authorization,
 - a. then a second line would apply

Part H Travel Itinerary (REQUIRED FOR VISA ONLY)		This Section dates MUST match Part K		
Destination Country	Destination Cities <i>(List all Cities Separately)</i>	Departure Date from US/next Country	Arrival Date <i>(in Country)</i>	Return Date to next Country/US

Part K, requires all types of transportation, including ground transportation

Part K Transportation Information (ONLY NEEDED FOR COUNTRY CLEARANCES)				
Flight/Rail/Car/Taxi	Departure Airport	Departure Date & Time	Arrival Airport	Arrival Date & Time
example: United 374	example: Washington Dulles	example: 6/26/14 3:40 pm	example: London	example: 6/27/14 10:00 am

Part M, requires information for Country Clearance such as the training certificates, all travel arrangers need to do is replace the xx/xx/xxxx with actual dates. This does not take the place of uploading the certificates to the Portal ticket for country clearance. Certificates are still required to be uploaded.

Part M Other Embassy/Requested Information (REQUIRED for Country Clearance Only) i.e. HTSOS/CTAT, PDS/BRIEFING, MEDEVAC, and STEP INFORMATION.

Counter Threat Awareness Training (CTAT) completed on xx/xx/xxxx.
ARS International Engagement and Travel Awareness Training completed on xx/xx/xxxx.
Enrolled in Smart Traveler Enrollment Program (STEP) confirmation on xx/xx/xxxx.

If you have any questions, please let me know. I hope these changes make filling the form out a little easier, comments welcome!

Karen Hughes

Travel Specialist
309/681-6611 | FAX 309/681-6648
Karen.Hughes@usda.gov



Agricultural Research Service,
Financial Management, Travel and Agreements
MidWest Area Administrative Office
1815 N. University Street, Peoria, Illinois 61604

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)

<input type="checkbox"/> Male <input type="checkbox"/> Female	Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Seperated <input type="checkbox"/> Widow(er)
Home Address:	
City, State Zip Code:	
Business & Home Phone Number:	International Cell Phone: <i>(Required for Country Clearance)</i>
Security Clearance Level: <i>(Required for Country Clearance)</i>	Date Security Clearance Obtained:

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

Name:	Relationship:
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?

