Clear Form

Request for Travel Reservations

Name of Requestor: _____ Phone #: _____ E-mail: _____

Name of Traveler: _____ Phone #: _____ E-mail: _____

Please check one of the following

SAIC Employee ☐ Speaker/Consultant ☐ Interview Candidate ☐ Non-Employee/Other ☐

Airline and Train Reservation Information (use comments section for multiple destinations):

Departure Date: _____ Preferred Time: _____ Preferred Airline: _____

Departure Airport: BWI ☐ Dulles(IAD) ☐ National (DCA) ☐ Other: ☐ _____

Destination Airport/City: _____ Return Date: _____ Preferred Time: _____

Seat Preference: _____ Frequent Flyer Miles #: _____

Special Needs/Requests: _____

Hotel Reservation Information:

Do you need SAIC Travel's assistance with making hotel reservations? Yes ☐ No ☐

If yes, please list your preferred hotel(s): _____

Date that hotel is needed if different than departure and return date listed above: Check In: _____ Check Out: _____

Non-Smoking Room: ☐ Smoking Room: ☐ Bed Preference: _____

Special Needs/Requests: _____

Car Rental Information (COA is required):

Do you need SAIC Travel's assistance with making rental car reservations? Yes ☐ No ☐

Preferred Rental Agency: Hertz ☐ Budget ☐ Other ☐ _____

SAIC has agreements with Hertz and Budget, if you prefer another agency that offers a better price, please provide the information in Other.

Comments: