



**SENSITIVE BUT UNCLASSIFIED (SBU)**

**REQUEST FOR OTHER THAN COACH CLASS TRAVEL**

**Privacy Act Statement**  
**Authority:** 5 U.S.C. 301, Departmental Regulations; 5 U.S.C. Ch. 57, Travel, Transportation, and Subsistence; 22 U.S.C. Ch. 32, Foreign Assistance, Subchapter I, International Development; and 22 U.S.C. § 4081, Travel and Related Expenses.  
**Purpose:** To manage requests for premium-class air travel exceptions for USAID direct-hires and their dependents, Personal Services Contractors (PSCs), consultants and personnel from other government agencies on detail to USAID.  
**Routine Uses:** The personal information requested on this form will be used by USAID travel officers to determine eligibility for premium class air travel accommodations. Pursuant to Privacy Act System of Records Notices USAID-19 and USAID-34, USAID will disclose this information only to external entities that have the legal authority to maintain the information such as members of Congress, federal law enforcement agencies, the U.S. Department of State, the U.S. Treasury for payments, and U.S. Dispatch Agents for shipment and clearance of effects. USAID may also share the information with commercial travel, transportation, and shipping companies for making travel, transportation, and shipping arrangements as well as with foreign governments and international agencies as appropriate.  
**Disclosure:** Disclosure of your personal information is voluntary, but failure to provide certain information may result in the denial of your request for premium class air travel. Please refer to ADS 522.3.20 for guidance.  
**System of Records Notice(s):** USAID -19 Travel and Transportation Records FT 78381, January 29, 2015; USAID -34 Personal Services Contracts Records 80 FR 11391, April 2, 2015

<b>Last Name:</b>	<b>First Name</b>	<b>Office/Bureau:</b>	<b>Date:</b>
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<b>Trip ID:</b>	<b>Origin:</b>	<b>Destination:</b>
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**Purpose:**

<b>Departure Date: (MM/DD/YYYY)</b>	<b>Return Date: (MM/DD/YYYY)</b>	<b>One-Way:</b> <input type="checkbox"/> <b>Round Trip:</b> <input type="checkbox"/>
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**Other Than Coach Class Air travel is requested based on the following (check one):**

<input type="checkbox"/>	TDY for flights in excess of 14 hours when all other alternatives have been exhausted (i.e., rest stops, business class lounge, etc.). The traveler must report for official duty within 24 hours of arrival.	<input type="checkbox"/>	The use of other than coach class accommodations pose a security risk to the traveler or to the Agency.  <b>The Mission Director, in consultation with the Regional Security Officer (RSO), must clear this justification when the travel is funded by the Mission.</b>  <b>Signature:</b> _____
<input type="checkbox"/>	MEDEVAC <b>*Must accompany the letter issued by State/MED.</b>	<input type="checkbox"/>	Results in an overall cost savings to the government. by avoiding additional subsistence costs (such as lodging and meals), overtime, or loss of productivity while awaiting coach class accommodations. <b>*Must accompany written justification.</b>
<input type="checkbox"/>	When a traveler has an approved medical accommodation authorized by OCRD. <b>*Please attach letter from OCRD.</b>	<input type="checkbox"/>	When transportation is paid from a non-federal source.  <b>GC/EA or RLO Signature:</b> _____
<input type="checkbox"/>	When space is not available in coach class and trip is urgent and cannot be postponed. <b>*Must accompany written justification.</b>	<input type="checkbox"/>	Authorized for flights less than 14 hours because of agency mission. <b>*Must accompany written justification.</b>  <b>DA Signature:</b> _____

<b>Traveler's Signature and Date:</b>
<b>Supervisor's Signature and Date</b>
<b>M/MS/TTD Chief or designee and Date:</b>