

eTravel New Profile Request

PRIVACY ACT STATEMENT: This statement is provided pursuant to the Privacy Act of 1974, 5 USC § 552a.

AUTHORITY: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 110012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109.

PURPOSE: The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government.

ROUTINE USE(S): The information will be used by officers and employees who have a need for information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies when relevant to civil, criminal or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011 (b) and 6109) and E.O. 9397, November 22, 1943, for use as a taxpayer and/or employee identification number;

DISCLOSURE: Disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your Employee ID and other requested information is voluntary in all other instances; however, failure to provide the information required to support the claim may result in delay or loss of reimbursement.



Must Use Full Legal Name First Name should not exceed 15 characters

FIRST	<input type="text"/>	MIDDLE	<input type="text"/>	LAST	<input type="text"/>
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GOVERNMENT EMAIL

Office Phone

or Arrangers Government email address if for an Invitational Traveler

Government Agency (assigned)

E2 Employee ID/
Delphi Supplier #

*Note-The Delphi Supplier # and E2 Employee ID are the same number
100XXXXXX

When setting up your NEW eTravel profile please add your home address first. Add Travel Charge Card information (if you have one) and then set up Travel Preferences. If your home address is not in your eTravel profile you will not be able to make reservations.

If you are traveling as a guest or to perform duties for another agency that is not your assigned Government Agency, please select the agency from this list. (Example: Assigned Agency is NHTSA, Traveling for FHWA, select FHWA)

ORGANIZATION INFORMATION

MINOR CUSTOMER

ROUTING TEMPLATE

USER ACCESS Check All That Apply	TRAVELER	ROUTING LIST OFFICIAL (Reviewer, Fund Certifier, Approver)	ARRANGER
USER TYPE		DOCUMENT VIEW ACCESS	
ARRANGER ACCESS		REPORTS ACCESS	
APPROVER ACCESS			

*Note: Approval access is given per this form in an eTravel profile.

Approvers will still need to be listed in routing pools in order to approve documents.

Routing Pool Approver Modification form can be found on the ESC Travel Website <https://www.esc.gov/Services/TravelServices/eTravelForms>

AGENCY APPROVAL

APPROVER NAME

GOVERNMENT EMAIL

Approver's Digital Signature

Comments

Form instructions can be found on the ESC Travel Website <https://www.esc.gov/Services/TravelServices/eTravelForms>. If you have additional questions completing the form, contact the ESC eTravel Helpdesk by phone 866-641-3500 option 7 or email 9-amc-etravel-helpdesk@faa.gov

***All Forms must be signed by an Approver**

Email completed and approved form to 9-amc-etravel-helpdesk@faa.gov

OPM E2 forms must be approved by an OPM travel POC before sending to ESC, contact Travel@OPM.gov for further instructions.