

Mandatory Pre-Travel Form

I have read and understand the "Defensive Travel Briefing". Per SEAD 3, I have also included my itinerary. I am aware that any questions I have concerning the contents of this briefing should be directed to the FSO. If cleared and indoctrinated for Classified access, I also agree to contact the appropriate security office FSO / (SCI SMO) prior to and following my travel.

Travel Dates				
Start:	End:	End:Date Notified FSO:		
Modes of Travel:				
Reason for Travel/Visi	+			
•		onOfficial trip for No	n-DOD purposes	
			in process	
Travel Document				
<u> </u>	Passport Card	Birth Certificate	None	
If none explain				
#	Issuing Country	Ехр	Issuing Date	
Countries Visited:		Destination(s):		
Addresses Visited:				
Mode of transport To	Country:	In Country:		
Is this destination/rout	te thru or to a country or	n the State Dept Travel Advis	sory list?	
Is this country(s) on th	e DNI world-wide threat	assessment list?		
Names and Associatio	ns of Travalina Compani	ions		
Names and Associatio	ns of Traveling Compani	ons		
Planned Contacts (wit	h foreign govts, compar	ies / citizens and reason for	r contact)	
Name(s):		Type:		
Citizenship:	Reason:			
Name/Phone/Address	/Relationship of Emerg	ency Contact:		
Itinerary (List countrie	s entered and exited wi	th Dates)		
COMMENTS:				
Name	Sign	ature	Date	