

DATA Collected
ON LINE

Travel Arrangement Card

For official government airline reservations only; complete this card and mail immediately upon acceptance of your appointment. PLEASE TYPE OR PRINT CLEARLY.

Name of New Cadet _____

Address (street) _____

Address (city, state, zip code) _____

Home Telephone _____

Business Telephone and Name of Contact _____

Name of Airport and City closest to your residence _____

Government Paid airline ticket needed: Yes _____ No _____

Optional Hotel Package - CADETS ONLY (Does Not Include Parents)

_____ I accept the accommodation package for Newark. Please enclose a \$135.00 check payable to C.W.T. to the above address with this card. This package is for accommodations on June 26, 2005 with a same gender roommate, and bus transportation to the Academy on June 27, 2005. ___ Male ___ Female.

_____ I decline the accommodations package.

If you have been recruited for a sports team please indicate the team and the date you were advised to arrive.

If traveling with family members, please provide flight information _____

The public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0702-0082), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN this form to the above address. Send your completed form to USMA, Admissions Office, Official Mail and Distribution Center, 646 Swift Road, West Point, NY 10996-1985. PRIVACY ACT STATEMENT AUTHORITY: Title 5 USC, Ch 301; Title 10 USC, Ch 403 Sec 4346; Ch 503, Ch 505 Sec 5051, Ch 603 Sec 5958; Title 44 USC 3101; EO 9397. PRINCIPLE PURPOSE: Collection of data on Academy candidate in order to make sure file has been completed. DISCLOSURE IS VOLUNTARY. However, failure to provide information could preclude appointment. ROUTINE USE: To aid in the processing of cadets.

USMA Form 8-2 1 OCT 90 (Rev Sep 2004)

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Please fold the bottom of this card up to protect your personal information. Tape at the top and mail. Thank you for your assistance.

CARLSON WAGONLIT TRAVEL
UNITED STATES MILITARY ACADEMY
OFFICIAL MAIL AND DISTRIBUTION CENTER
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