

DEPARTMENT OF HOMELAND SECURITY  
Transportation Security Administration

**TRAVEL SUPPORT REQUEST**

<b>INSTRUCTIONS:</b> Complete all applicable fields for request consideration. Reference Security Operations Administrative Directive, <i>Travel Protocol Office</i> . The completed Form may be submitted to <a href="mailto:TSA.TPO@tsa.dhs.gov">TSA.TPO@tsa.dhs.gov</a> . The Transportation Security Operations Center (TSOC) will retain the record and the Airport will retain a copy in accordance with the TSA Records Disposition Schedules.						
<b>Section I. TSA Travel Protocol Office Contact Information</b>						
Phone:		703-603-1558				
Email:		TSA.TPO@tsa.dhs.gov				
TPO Employee Name:			Internal Control Number:			
<b>Section II. Passenger Information</b>						
Request Date:		Name (first, middle, last):				
Official Title:			Country:			
Travel Coordinator Name:			Title:			
Email:		Phone Number:		Itinerary Provided Yes      No		
Flight Itinerary						
Depart Airport	Airline	Flight #	Depart Time	Arrival Time	Arrival Airport	Date of Travel
Additional Passengers (provide first and last names of all additional traveling passengers.)						
NOTES						

**Privacy Act Statement:** **AUTHORITY:** 49 U.S.C. § 44927. **PRINCIPAL PURPOSE(S):** This information is used to coordinate and provide airport security screening assistance to eligible travelers. **ROUTINE USE(S):** This information may be shared in accordance with the Privacy Act of 1974, 5 U.S.C. §552(a), or for routine uses identified in the TSA system of records, DHS/TSA-001, Transportation Security Enforcement Record System. **DISCLOSURE:** Furnishing this information is voluntary; however, failure to provide the requested information may prevent TSA from providing assistance through airport security screenings to eligible travelers. **Paperwork Reduction Act Statement:** The collection involves the submission of travel information to Transportation Security Administration to provide wounded warrior, severely injured military personnel, and certain other travelers with assistance through the airport security screening process. This is a voluntary collection. It is estimated that the total average burden per response associated with this collection is approximately 5 minutes. An agency may not conduct, or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number assigned to this collection is OMB 1652-0069 which expires 04/30/2025. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden to TSA PRA Officer, 6595 Springfield Center Drive, Springfield, VA 22150. ATTN: PRA 1652- 0069.

*Previous editions of this Form are obsolete*