

# TDY TRAVEL REQUEST WORKSHEET

EMPLOYEE ID <hr style="border: 1px solid red;"/>	Name ( <i>Last, First, MI</i> ) <hr style="border: 1px solid red;"/>
GRADE/RATE <hr style="border: 1px solid red;"/>	DIV/BRANCH <hr style="border: 1px solid red;"/>
OFFICE PHONE NUMBER <hr style="border: 1px solid red;"/>	

**PURPOSE:** To request TDY Travel Orders and desired advances. If you have any questions, **CONTACT YOUR UNIT ADMIN OFFICE.**

**PRIVACY ACT STATEMENT:** IAW 5 USC Sec. 522a(e)(3), the following is provided when supplying personal information to the U.S. Coast Guard:

- ◆ **Authority** - 10 USC Section 2771.
- ◆ **Principal Purpose** - Used to indicate member's intentions during TDY travel.
- ◆ **Routine Uses** - Same.
- ◆ **Disclosure** - Disclosure of this information is voluntary, but without disclosure member may not receive advances.

**\*\*\*\*\*ATTACH A COPY OF AUTHORITY FOR TDY\*\*\*\*\***

**ATTN:** TDY for Advanced or Specialized Training requires that a member meet the obligated service requirement as expressed by Section 2.B.1.a.(4) of the Training & Education Manual (COMDTINST M1500.10B).

Do you meet the obligated service requirements for these orders? (*Check One*)     YES     NO

Enter Travel Order Number (TONO) and accounting data:

Tono: \_\_\_\_\_ Est Cost (see reverse for calculations): \_\_\_\_\_

Acct data: \_\_\_\_\_ / / / / / / / / / /

Project Number: \_\_\_\_\_

**DO NOT FILL OUT.  
FOR SUPPLY USE  
ONLY**

DEPARTURE DATE: \_\_\_\_\_ RETURN DATE: \_\_\_\_\_ EST. DAYS ABSENT: \_\_\_\_\_

DESTINATION: \_\_\_\_\_

PURPOSE OF TDY (specify type of training or meeting): \_\_\_\_\_

I request leave.

Date to begin LV

Enter LV amount

LEAVE ADDRESS	PHONE#
<hr style="border: 1px solid red;"/>	<hr style="border: 1px solid red;"/>
<hr style="border: 1px solid red;"/>	<hr style="border: 1px solid red;"/>

**Traveler's Mode of Transportation:**

<input type="checkbox"/>	GOVERNMENT CONVEYANCE
<input type="checkbox"/>	PRIVATELY OWNED VEHICLE (POV)    ADVANTAGEOUS TO GOVT - <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	COMMERCIAL AIR
<input type="checkbox"/>	GOVERNMENT PROCURED TRANSPORTATION
<input type="checkbox"/>	RENTAL CAR

<b>REQUEST FOR ADVANCES</b>	<b>YES</b>	<b>NO</b>
<u>DO YOU HAVE A GOVERNMENT CHARGE CARD?</u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>HAVE YOU VERIFIED THAT YOUR CREDIT LIMIT IS \$2500.00?</u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>IS GOVERNMENT QUARTERS USE DIRECTED?</u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>IS GOVERNMENT MESSING USE DIRECTED?</u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>WOULD YOU LIKE ADVANCE PER DIEM?</u> (IF YES, AMOUNT \$ _____ )	<input type="checkbox"/>	<input type="checkbox"/>

MEMBER'S COMMENTS:

DATE	MEMBER'S SIGNATURE
_____	_____

SUPERVISOR'S COMMENTS:

DATE	SUPERVISOR'S SIGNATURE (Does member meet weight requirements IAW COMDTINST M1020.8(Series)) <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, refer to COMDTINST M1020.8 for guidance) <b>Department Head: CDR McAvoy, CDR Cooper, LCDR Imahori, LCDR Carroll</b>
DATE	SIGNATURE OF FUNDS APPROVING OFFICIAL (if applicable) <b>FUNDS: CWO Resto, Mr. Hurst</b>
DATE	APPROVING OFFICIAL'S SIGNATURE <b>AO: CWO Alvarez, YNCS Bailey, YN1 Belger</b>

**Cost Calculations**

a. Cost of Lodging per Day	b. Number of Days of Lodging	c. Total Cost of Lodging (a)(b)
d. Cost of M&IE Rate per Day	e. Number of Days of M&IE	f. Total Cost of M&IE (d)(e)
g. Cost of Airline Ticket	h. Cost of Airline Service Fee	i. Total Cost of Ticket & Fee (g+h)
j. Cost of POV (.445 per mile)	k. Cost of Rental Car	l. Registration Fee
m. Other Cost	Total Cost of TDY (c+f+i+j+k+l+m)	

Orders completed. Date \_\_\_\_\_

Leave (if requested) recorded on CG-2519. Date \_\_\_\_\_

Initials: \_\_\_\_\_