



## Window On Science Application - Before Trip 1

Per Diem Rates Query

https://www.defensetravel.dod.mil/site/perdiemCalc.cfm

## Welcome to the Window On Science Program

Instructions for Program Officer and Traveler:

Please ensure that you complete all required information in the following pages under each yellow tab.

Insufficient information will be rejected and delay approval of the travel package.

WOS Program is administered under the Invitational Travel Authorization provisions in Joint Travel Regulation (JTR).

The JTR applies to and includes other authorized travelers who use appropriated DoD funding.

All the travel and transportation allowances will be paid/reimbursed as stipulated. If you have any questions, please let your Program Officer know, or, you may refer questions to the WOS coordinating specialist in the administering office (AOARD).

- \*Please DO NOT update, change the format of this form.
- \*Due to COVID-19, the actual venue, the start date, the visiting dates and the end date might be changed accordingly.

Please see travel tips below:



										WOS	)-
1. Info	rmation (	Complete	d by P	rogra	m O	fficer					
Prograi	n Officer										
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1-2 (Lo	cation	2) Host											
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□ Location of this visit is the US Forces/government installation requires an advance authorization for the entry.  (Includes NASA, National Institute, Academy, Archive Center, Lab, etc.)  □ Venue is the same as the host's information above (Work place of the host). Requires the visit authorization request.  □ Venue is other location than the work place of the host, and requires the visit authorization request.  (Please fill out below.)  Installation □ Directorate □ Office Symbol □ Address □ City □ State □ Country □ Phone  □ Location of this visit is 'Off-Base/Post/Camp' (Please fill out below).													
Hotel, Conventi	on Center, Con	ference Hall, etc.	Address		City		State	Country			Phone		
Venue													
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Special Requirements, Scheduled Services, Performance, etc.													
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## 2. Information Completed by Traveler

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Country		Pass	port Issuing Country	y Pass	port Ty	/pe	Passport	Nun	Number Expiration Date (If any) L					S VISA Number   Expiration Date		
2-2. Employ	yer of t	he V	isitor												-	
			ute, Company, O	rganizatio	n, Cor	porat	ion, etc.		Faculty,	Director	ate, Depart	ment, Bur	eau, etc.			
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Address 1								AUULESS Z								
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Research Case, Submission of the Intermediate / Final Report																
☐ Other (Please Specify)																
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Hard the second techniques of the second state						lf	Yes, ple	ase spec	ify here.							
Has the work to be presented been funded by the Air Force, or any						. F -	<u> </u>	-								
other U.S. military organization in the past? ☐ Yes ☐ No									1							
Will this presentation be given in a public forum? (i.e., a conference, as opposed to a meeting at which only military researchers will be)							]Yes	□No								

2-3 (2). Visit OI	bjective <l< th=""><th>ocation 2&gt;</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></l<>	ocation 2>									
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Purpose < Loca	tion 2>										
Site Visit must ha  I am an officia  Presentation S	al invitee of t		conference, symp			Name of the Meeting, Conference, Symposium, etc.					
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☐ Pre-Contract no Research Case, S											
☐ Other (Please	Specify)										
Has the work to be presented been funded by the Air Force, or any other U.S. military organization in the past?   Yes  No						If Yes, please specify here.					
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2-3 (3). Visit Ob	jective < Location 3	>								
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	ion be given in a public ting at which only milita			□Yes □No						

	WOS-							
3-1. Visit Authorization Request								
☐ This case does NOT have any visit locations at DoD installation and does NOT require any advance at	uthorizations.							
☐ The respective foreign disclosure office(s) have been/will be notified.								
The request has been (will be) sent on								
the concurrence will be assumed at the 10th day from the request date unless otherwise notified.								
3-2. FD Memo Check								
☐ Technology Security Check has been conducted on and the record document has been filed.								
3-3. WOS Confirmation								
I hereby certify that the travel purpose, itinerary are proper and justifiable, terms & conditions have been agreed with the traveler.	n mutually							
4. Approval of Authorizing Official								
I hereby certify this case and authorize to officially transfer to the Administering Office (AOARD).								