



# UCLA Travel Center Traveler Profile

All information provided on this form will be stored for each traveler in the UCLA Travel Center's reservation system. This will save travelers and travel arrangers time in making reservations and ensure greater accuracy in reservations. All information will be held in strict confidence.

### PLEASE COMPLETE AND RETURN PROMPTLY

Name: \_\_\_\_\_

Title: \_\_\_\_\_

School/College/Division: \_\_\_\_\_

Department Number: \_\_\_\_\_  
(MUST BE 4 DIGITS)

Employee ID Number: \_\_\_\_\_  
(MUST BE 9 DIGITS)

E-mail Address: \_\_\_\_\_

Campus Delivery Address: \_\_\_\_\_

Mail Code: \_\_\_\_\_

Campus Extension: \_\_\_\_\_

Fax Number: \_\_\_\_\_

\*Home Phone: \_\_\_\_\_

\*Home Address: \_\_\_\_\_

Primary Funding Source for Travel (UCLA ACCOUNT NUMBER)

4 - \_\_\_\_\_ - \_\_\_\_\_

Charge my business travel to Card Number: \_\_\_\_\_

Travel Arranger's Name/Phone/Fax (if different from traveler): \_\_\_\_\_

### AIRLINE INFORMATION

#### Seating Preference

- Smoking
- No Smoking
- Aisle
- Window

#### Special Dietary Needs

- Low Sodium
- Vegetarian
- Low Cholesterol
- Diabetic
- Kosher
- Other \_\_\_\_\_

### Frequent Flyer Memberships

United # \_\_\_\_\_

Delta # \_\_\_\_\_

Southwest # \_\_\_\_\_

Other # \_\_\_\_\_

### CAR RENTAL INFORMATION

Alamo # \_\_\_\_\_

Other # \_\_\_\_\_

### HOTEL PREFERENCE (List hotel name & membership number)

\_\_\_\_\_  
\_\_\_\_\_

Special Request: \_\_\_\_\_

Bed Type: \_\_\_\_\_

Smoking/Non-Smoking: \_\_\_\_\_

Hotel Guarantee Credit Card Name and Number with expiration date:

\_\_\_\_\_

### INTERNATIONAL TRAVEL INFORMATION

Passport #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Place/Date of Issue: \_\_\_\_\_

Place/Date of Birth: \_\_\_\_\_

### OTHER PERSONAL PREFERENCES FOR BUSINESS TRAVEL OR OTHER REMARKS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### PERSONAL TRAVEL INSTRUCTIONS

Charge my personal travel to:

Card Name/Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

I authorize the UCLA Travel Center to charge my business or personal credit card indicated above for air, car, rail transportation or hotel, upon my request.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### PLEASE MAIL OR FAX THE COMPLETED PROFILE FORM TO



UCLA TRAVEL CENTER  
10920 Wilshire Blvd. Suite #100  
Mail Code # 143348  
Campus extension: 62639  
Campus Fax: 42703

E-mail: [travel@finance.ucla.edu](mailto:travel@finance.ucla.edu)  
Web: [www.travel.ucla.edu](http://www.travel.ucla.edu)

\*Voluntary Information (Supplying this will help us serve you better)