



### Traveler Profile

By virtue of completing this form, I hereby consent and agree that any of my personal information provided herein, including any update thereto, as collected by the Centre or its designate, may be disclosed to, used or retained by any outside third party designated by the Centre (including air carriers, hotels, car rental agencies and travel agencies) on a need-to-know basis **for the exclusive purposes of facilitating any official travel arrangements I require in connection with my contract or agreement with the Centre.**

Please check box to confirm that you, the traveler, have read the above disclaimer.

<b>Personal Information</b>	
<i>Mandatory fields are marked with * (Information should be as it appears on your passport)</i>	
H.E.    Dr.    Prof.    Mr.    Ms.	*Gender: Male    Female
*Last Name(s):	*First Name(s):
*Official Title:	
*Entity:	
*Email address:	
*Working Language:	
<b>Additional Information</b>	
*Citizenship:	*Date of Birth (DD/MM/YY):
*Passport number:	Place of Birth:
*Passport issued by:	*Date of issue:
In what city:	*Expiry Date:
*Home Address:	P.O. Box:
*Town/City:	*Province/State:
Zip/Postal Code:	*Country:
*Home Telephone:	Mobile:
*Business/Contact Telephone:	Fax:
<b>Travel information to: (Destination Country)</b>	
*Departure city:	*Destination City
*Departure date:	*Latest arrival date:
Airline preference:	Seat preference:
Preferred connection points (if applicable):	
*Return Date:	Special meal requirements:
Address in <b>(Destination Country)</b>	
Additional information / Comments: (e.g., Contact Person, Has US Visa)	

Please check your information carefully before submitting the form.

Please ensure that you familiarize yourself with the IDRC Corporate Travel Policy:

<http://www.idrc.ca/EN/Documents/Corporate-Policy-Travel-EN.pdf>