Department of Veterans Affairs

TRAVEL POLICY DIVISION
COUNTRY CLEARANCE APPLICATION

The following information for Country Clearance must be provided to the VACO International Travel Section no later than **60 DAYS** prior to your departure date. Forms must be e-mailed to officialpassports@va.gov by clicking on the submit button in the lower right hand corner of the form. For questions, contact the VACO International Travel Section at officialpassports@va.gov.
PLEASE COMPLETE A SEPARATE COUNTRY CLEARANCE FORM FOR EACH FOREIGN COUNTRY YOU WILL VISIT ON OFFICIAL TRAVEL.

ALL FIELDS MUST BE COMPLETE

FULL NAME OF TRAVELER:	COUNTRY OF BIRTH:	☒ U.S. CITIZEN ☐ NON-U.S. CITIZEN
WORK ADDRESS *(if Non-VA or University)*:	VA WORK ADDRESS *(Delivery for passpost)*:	
PHONE NUMBER AND EXTENSION *(Include area code)*:	ALTERNATE PHONE NUMBER AND EXTENSION *(Include area code)*:	ORGANIZATION *(Select from drop down menu)*
WORK E-MAIL ADDRESS:	ALTERNATE E-MAIL ADDRESS:	VHA
STATION NUMBER	TITLE AND GRADE OF TRAVELER:	
VA POINT OF CONTACT NAME *(POC)*:	VA POC PHONE NUMBER AND EXTENSION *(Include area code)*:	POC E-MAIL ADDRESS:
NAME OF EMERGENCY CONTACT IN UNITED STATES:	EMERGENCY CONTACT PHONE NUMBER AND EXTENSION *(Include area code)*:	SECURITY CLEARANCE LEVEL *(Write "NONE" if unknown)*:
HAVE YOU BEEN ISSUED AN OFFICIAL/DIPLOMATIC PASSPORT FROM VA *(If yes, enter passport information)*: PASSPORT NUMBER EXPIRATION DATE ☐ YES ☐ NO	DO YOU HAVE AN OFFICAL/DIPLOMATIC PASSPORT FROM ANOTHER FEDERAL AGENCY *(If yes, enter passport information)*: PASSPORT NUMBER EXPIRATION DATE ☐ YES ☐ NO	

TRAVEL INFORMATION

CITY AND COUNTRY TO BE VISITED ON OFFICIAL TRAVEL:		
DEPARTURE DATE FROM THE UNITED STATES:	DEPARTURE LOCATION FROM THE UNITED STATES:	NAME OF AIRLINES ;
FLIGHT NUMBERS AND DEPARTURE TIME / ☐ AM ☐ PM; / ☐ AM ☐ PM; / ☐ AM ☐ PM; / ☐ AM ☐ PM		
LAYOVER INFORMATION		
RETURN DATE TO THE UNITED STATES:	LOCATION OF DEPARTURE TO THE UNITED STATES:	NAME OF AIRLINES ;
FLIGHT NUMBERS AND DEPARTURE TIME / ☐ AM ☐ PM; / ☐ AM ☐ PM; / ☐ AM ☐ PM; / ☐ AM ☐ PM		
LAYOVER INFORMATION		
PURPOSE OF TRAVEL *(Include details)*:		
BEST METHOD TO CONTACT TRAVELER PRIOR TO DEPARTURE:	INTERNATIONAL POINT OF CONTACT:	PHONE NUMBER AND EXTENSION *(Include Area Code)*:

INTERNATIONAL HOTEL/LODGING *(Must be completed)*

NAME AND ADDRESS OF HOTEL:	HOTEL PHONE NUMBER AND EXTENSION *(Include Area Code)*: HOTEL CONFIRMATION NUMBER:	**Click to Submit by Email**