

## Non-Employee/Small Group Travel Portal Request Form

The University of Miami <u>Travel Portal</u> allows employees and students the option to book travel for non-employees. However, if a non-employee or group is required to book their own travel arrangements, the following request form must be completed.

Once processed, non-employees will be able to call **Travel Incorporated Travel Agent Support** (Travel Incorporated) to complete the purchase:

> Travel Incorporated Travel Agent Support M-F 8AM-6PM. After-hours available for a fee. Toll Free: 888-241-0944 (inside North America) Direct: 770-291-5187 (outside North America) Email: UM@travelinc.com

Note: This form should also be used for group travel that will be funded by the University of Miami.

**Step 1:** Complete a travel profile by visiting <u>miami.edu/travelportal</u>. You will be listed as the *Travel Assistant* for reservations pertaining to this request. Click <u>here</u> to view the first-time travel portal signins tip sheet.

Step 2: Please complete the request form on the next page. The fields outlined in red are required.

**Step 3:** Once completed, please email the form to Travel Incorporated at <u>molly.berger@travelinc.com</u> and CC <u>travel@miami.edu</u>.

**Step 4**: 48 hours after submission of the form, you can notify your travelers that they can contact Travel Incorporated to make their travel arrangements.

For security reasons, please do *not* provide credit card information on the form. If a master credit card will be used, Travel Incorporated will reach out to obtain payment information.

Step 5 (optional): If you need to add or make changes, please contact Travel Incorporated directly.

## Non-Employee/Small Group Travel Portal Request Form

Requestor (employee)	
Information – include	
name, email, phone	
number, and employee ID	
Meeting name or requestor's	
department name	
Description of event/request	
Names and number of	
travelers, if available (provide	
contact information if Travel	
Incorporated is to contact the	
traveler)	
Name of contact that will call	
Travel Incorporated to make	
arrangements	
Responsible party for	
payment of companion tickets	
Date Range this request	
should be active for: (please	
include how long you'd like	
these individuals to have access	
to call Travel Inc.)	
Payment instructions:	
(charged to University travel	
card, travelers pay for	
themselves, or mix)	
Dates of travel	

Traveling to/from	
Flight time specifications or requests	
Budget per ticket	
Approval request (if ticket is over budget)	
lf car and/or hotel reservations are needed, please specify here	
Special instructions – please provide any additional details, if applicable	

FOR TRAVEL AGENT USE ONLY							
	Cost Center Number * (Udid 22)	Cost Center Name* (Udid 23)	EmpID* (Udid 25)	Meeting ID* (Udid 26)	Trip Purpose* (Udid 57)		
Account Codes							