



# U-S AIRWAYS

## APPLICATION FOR TRAVEL PRIVILEGES

### US Airways

Employee Travel Services  
111 W. Rio Salado Parkway  
Tempe, AZ 85281  
Phone – 480-693-8717

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The **Employee Travel Guide** is posted on the Travel page of Wings and theHub. The information contained in the Guide applies to all US Airways and US Airways Express employees, retirees and all dependents who are eligible for travel privileges. It's your responsibility as an employee to keep yourself and your eligible dependents informed of our travel policies.

Please use full legal names as contained on government issued identification - no nicknames or initials in the place of names.

### PLEASE COMPLETE APPLICABLE SECTIONS

Employee First Name		Middle Name	Last Name		Gender <input type="checkbox"/> M <input type="checkbox"/> F
6 digit ID #	Alpha/numeric # (West Origin)	Social Security #	Date of Birth	Dept & City	Date of Hire
Home Phone #		Cell Phone #	Email Address		

### ELIGIBLE FAMILY MEMBERS (complete up to one only of Spouse, Domestic Partner or Registered Guest)

#### SPOUSE

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
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#### DOMESTIC PARTNER

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
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#### REGISTERED GUEST

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
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#### DEPENDENT CHILDREN 18 or UNDER as of end of calendar year OR SPECIAL NEEDS DEPENDENT CHILD of any age

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Step <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F

#### DEPENDENT CHILDREN AGE 19 but less than 24 at any time in the calendar year w/FULL TIME STUDENT STATUS

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Step <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F

#### PARENTS/IN-LAW

First Name:	Middle Name	Last Name	DOB	Add <input type="checkbox"/>	Delete <input type="checkbox"/>	Birth <input type="checkbox"/>	Step <input type="checkbox"/>	In-Law <input type="checkbox"/>	Gender <input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> M <input type="checkbox"/> F

Are any of the dependent travelers you have indicated on this travel application current or former employees of US Airways, America West, or any subsidiary of the company?  YES  NO

I declare the above information to be true. I understand that any employee or family member who attempts to or does obtain free or reduced rate transportation in violation of US Airways non-revenue space available pass travel policy may result in any or all of suspension of privileges, disciplinary action up to an including termination of employment and requirement to pay full fare for any travel so received.

Signature:	Date:
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\*\* Please put employee name and ID number on all documents and send with a Travel Application \*\*

 **U.S AIRWAYS**  
Documentation Requirements for Pass Travel Privileges

**Revised: 8-12-09**  
**\*\* Read all SPECIAL NOTES below \*\***

Employee	Documentation	Dependent Children	Documentation	Special Notes - Legal Names
Must Complete 15 days of service. Travel can begin the 16th day.	Must be entered in Human Resource Records System.	Children under the age of 19 who are biological, legally adopted or the employee is the child's court-appointed legal guardian. Emp must provide at least 50% of child's financial support and child must be unmarried.  Foster Children are not eligible	Government issued Birth Certificate w/parental names appearing on document, legal adoption papers or legal guardianship papers processed thru the court system. Power of attorney docs do not qualify.	Due to strict security measures, names on the family member's driver's license or passport must match the names entered in ETC. (No Nicknames) If the documents turned into Employee Trvl state names differently than picture ID, please provide court ordered proof of name change
Spouse	Documentation	Dependent Step Children	Documentation	Special Notes - Documentation
Currently and legally married to the employee as recognized by the Internal Revenue Service	Government issued Certified Marriage Certificate that has been filed with the county registrar's office.	Employee must be legally married to the biological or adoptive parent of child age 23 & under or the biological or adoptive parent of child 23 & under must be a qualified Domestic Partner.	Government issued Birth Certificate w/parental names appearing on document & proof of full-time registration as described below.	Marriage documents from a church or Birth documents from a hospital are not certified government issued documents and are not acceptable proof of eligibility.
Domestic Partner	Documentation	Full Time Student Dependents	Documentation	Special Notes - Documentation
Qualified through Benefits Dept; Certain co-residency & financial interdependence qualifications must be met.	Download Domestic Partner Packet from The Hub or Wings in the Benefit Forms section & submit back to Benefits.	Children age 19 -23 or who will be turning 19 any time in current year must be <b>(1)</b> claimed as dependents on the employees' income tax, <b>(2)</b> full-time students carrying 12 semester hrs or more and <b>(3)</b> are unmarried.	Must provide a full time school schedule w/child's name, school's name, number of credits and semester date along with travel application.	Any Documents in a foreign language must be accompanied by a notarized translation into English.
Registered Guest	Documentation	Special Needs Dependents	Documentation	
Unmarried active emps without a Domestic Partner may elect to designate an adult age 18 or over for travel privileges.	Supply a copy of driver's license, passport, or government issued birth certificate that clearly states name & DOB w/application	Children age 19 and over who meet 4 criteria: (1) live in same home w/employee (2) cannot engage in substantial gainful activity because of a physical or mental condition (3) meets the dep test under IRS guidelines (4) a health care provider can verify condition is on-going.	To enroll, the employee must submit a Statement of Understanding for Special Needs Dependent Pass Travel; a copy of most recent tax return and a letter from a healthcare provider as verification that the child cannot engage in substantial gainful activity because of physical or mental condition and that the condition has lasted or can be expected to last continuously for at least a year or can lead to death. For more information, go to <a href="http://www.irs.gov">www.irs.gov</a> .	
Parents	Documentation	Parents-in-law	Documentation	Special Notes: Parents
Biological, legally adopted or was employee's court appointed legal guardian.	Employees' Government issued Birth Cert w/ parental names appearing on document, legal adoption papers or court ordered guardianship paperwork.	An in-law may be eligible for pass travel if one or both of the employee's <u>natural</u> parents are deceased. Only eligible for Guest Pass fare travel on US Airways only. Qualified Domestic Partner's parents can be added if above is met.	Government issued Death Certificate of the emp's <u>natural</u> parent(s). Sps's or Domestic Partner's govnmnt issued Birth Certificate w/parental names. <b>Death Certificates of step-parents do not qualify.</b>	Employee may only claim 2 individuals as parents during any calendar year. Therefore, if employee has a set of parents as well as a set of stepparents, employee must choose two of those individuals to travel on passes for that current year.
Stepparents	Documentation	Special Notes: Registered Guest		Special Notes: Parents
An individual who is legally married to a living natural parent of employee.	Government issued certified Marriage Certificate of living natural parent.	An employee may have either a Registered Guest, a Domestic Partner, or a spouse; not 2 or more of these and may activate the first Reg Guest at any time. A Reg Guest can be removed at any time, but another can not be added until 12 full months from the addition of a previous Registered Guest.		Parents & Stepparents may be switched for eligibility 1 time per year in the month of Jan. <b>Example:</b> Mother & stepfather in 2009, then father & stepmother in 2010.