

**BASIC ORDERING AGREEMENT (BOA) 0XXXX-F**

**For**

**INFORMATION TECHNOLOGY STAFF AUGMENTATION**

**SCHEDULE D**

**PRINCETON PLASMA PHYSICS LABORATORY (PPPL)  
GENERAL GUIDELINES FOR SUBCONTRACTOR TRAVEL**



## **PRINCETON PLASMA PHYSICS LABORATORY (PPPL)**

### **General Guideline for Subcontractor Travel**

#### **Overview**

PPPL is a Federally Funded Research and Development Center (FFRDC) operated by Princeton University under contract with the U.S. Department of Energy (DOE). As such, PPPL's travel policy incorporates the Federal Travel Regulations to the extent prescribed in our contract with the DOE.

The following procedures must be used for subcontractor travel. Consult the Subcontract document for information regarding any additional travel requirements or prohibitions that may apply. It is the traveler's responsibility to understand both the Subcontract travel requirements and this guideline. Questions should be referred to the PPPL Administrative Representative for this Subcontract.

#### **References**

Federal Travel Regulations (FTR)- URL: [www.gsa.gov/federaltravelregulation](http://www.gsa.gov/federaltravelregulation)

Domestic Travel Per Diem (General Services Administration)- URL: [www.gsa.gov/perdiem](http://www.gsa.gov/perdiem)

Foreign Travel Per Diem (State Department)- <http://www.state.gov/>

#### **Travel Approval & Documentation**

Unless otherwise excluded in the subcontract, all international travel (as defined in the FTR) performed under this subcontract must be coordinated with and arranged by the PPPL Travel Office [telephone: (609)243-2658; email: [travel@pppl.gov](mailto:travel@pppl.gov)]. Unless otherwise stated in the Subcontract, arrangements made and paid by PPPL include air transportation and conference fees. Hotel and rental car arrangements will also be made by PPPL, but will be paid by the traveler and reimbursed to the traveler directly by PPPL through a travel voucher after completion of the trip. Local transportation, airport parking, meals and incidental expenses (M&IE), telephone, tolls, gasoline, etc. expenses will also be paid by the traveler and reimbursed to the traveler through a travel voucher. These expenses are not billable under the Subcontract, and will not be reimbursed to the Subcontractor.

All international travel requests must be submitted to the Princeton Technical Representative using the attached PPPL Travel Approval form and Federal Travel Management System (FTMS) form, together with any additional documentation required to facilitate approval. Foreign travel must be entered into the Federal Travel Management System (FTMS) by PPPL and approved by the DOE before incurring expenses for travel arrangements. All travel performed by individuals under this subcontract must be approved by the PPPL Administrative Representative well in advance of planned travel, with the following lead times allowed for approval:

Domestic travel- 30 days (typical)

Foreign (non-sensitive)- 45 days (typical)

Foreign (sensitive country)- 60 days (typical)

In addition to completing the PPPL Travel Approval and FTMS input forms, the following information is required for all international travelers:

- Social Security Number;
- Passport Type;
- Passport Number;
- Passport Expiration Date;
- Country of Birth; and
- Citizenship.

This information will be collected the first time an individual travels to a foreign country under the Subcontract. This information must NOT be transmitted electronically. PPPL staff responsible for entering the data into the FTMS system will contact individual travelers via telephone to collect the information. The information is stored in the FTMS system only and will not be stored or accessible by PPPL.

Upon completion of foreign travel, travelers are required to complete and submit a PPPL Foreign Travel Trip Report (Attachment 4). Trip Reports should be forwarded to the PPPL Travel Office (travel@pppl.gov) as soon as travel is completed. Travel reimbursement will not be processed without the completed trip report. Questions about the report should be directed to the PPPL Travel Office.

### **Travel Period**

Official travel begins when travelers leave their home, office, or other authorized point of departure. Travel ends when travelers return to their home, office or other authorized arrival point.

### **Lodging**

Lodging is reimbursed at actual cost with receipts, and the amount claimed must be deemed "Reasonable." Reasonableness is determined by comparing actual cost with the lodging per diem for the area of business as found on the FTR (domestic) or State Department (international) websites

- Princeton must approve lodging costs in excess of the applicable per diem in advance, and in writing. Necessary approvals must be requested through the PPPL Administrative Representative well in advance of planned travel.
- Invoiced lodging costs greater than 100% and less than 150% of the FTR lodging allowance must be pre-approved (signed) by the PPPL Travel Office and must be accompanied by a written justification of the amount requested.
- Invoiced lodging costs that are greater than 149% of the FTR lodging allowance must be pre-approved (signed) by the Head, PPPL Office of Business Operations & Chief Financial Officer and must be accompanied by a written justification of the amount requested.
- It is the responsibility of travelers to notify their hotel as quickly as possible of any cancellations. As a general rule, to avoid a penalty the traveler must notify the hotel of a cancellation 48 hours before their scheduled check-in date. Any penalties that are a result of negligence on the part of the traveler are considered a non-allowable expense under the Subcontract, and therefore are **NOT** reimbursable. When notifying a hotel of cancellation, make sure that they give you a cancellation number and that you get the hotel representative's name.
- Travelers should use commercial lodging. If travelers choose to stay at the home of family members or friends, they will only be reimbursed at the M&IE rate for that location. Hostess gifts are not allowable under the terms of the PPPL contract with the DOE, and therefore, are **NOT** reimbursable.

### **Meals and Incidental Expenses (M&IE)**

Meal and incidental expenses (M&IE) shall be reimbursed according to a prescribed FTR per diem rate for the city in which the business takes place.

- Regardless of departure or arrival times, M&IE costs are reimbursed at 75% of the business destination M&IE rate on the day of departure and day of return/arrival. Other days are reimbursed at 100% of the M&IE rate.
- M&IE will be reimbursed up to 75% of the M&IE for trips greater than 12 hours but less than 24 hours in duration. M&IE expenses are not reimbursed for trips of less than 12 hours' duration.

### Transportation

- Automobile rentals should not exceed the rate of an intermediate car. If a full size vehicle is required, an explanation must be provided justifying the additional expense. If the Subcontractor (for domestic travel) or traveler (for direct reimbursement of international travel) does not provide a justification that PPPL deems adequate, PPPL reserves the right to reduce reimbursement of rental car expenses to the costs that would have been incurred for rental of an intermediate car.  
**Note: PPPL will not reimburse for the use of a GPS device under any circumstances.**
- When seeking reimbursement for a rental car, the rental agreement must be included with the travel voucher.
- Reimbursement for use of a personal vehicle will be allowable, provided this amount does not exceed the cost of using commercial transportation. Tolls must be itemized separately. The rate per mile for personal use of vehicles is available on the PPPL Travel website: <http://travel.pppl.gov>
- If more than two (2) taxis per day in any one (1) city are claimed, all charges must be listed individually.

Air transportation must be provided by a U.S.-flag carrier at coach or lesser fares. **Note: PPPL will reimburse for "excess baggage" charges, provided that the traveler includes a brief, written explanation with the travel voucher affirming that the extra luggage was related to business (e.g., the traveler was transporting equipment, materials/project supplies required on the trip; or that the extra luggage was required to transport additional personal effects required due to the length of the trip).**

### Telephone

- Telephone expenses must be itemized on the travel voucher. Expense for business calls must be distinguished from expense for personal calls.
- For travel exceeding 24 hours, personal calls may be reimbursed provided they do not exceed the following limits:
  - A maximum of \$4.00 per day, or \$12.00 per seven (7) day period for domestic travel.
  - A maximum of \$8.00 per day, or \$24.00 per seven (7) day period for foreign travel.

### Miscellaneous

**Princeton Area** When traveling into the Princeton area (including PPPL ZIP code 08543), lodging should not exceed the maximum FTR lodging allowance for the area, excluding taxes. Travelers should notify the hotel at the time of registration that they are on PPPL business, and the hotel will extend the PPPL rate, if available.

**Receipt Reimbursement** Original receipts are **ONLY** required for individual expenses exceeding \$75.00 that are excluded from the daily M&IE rates.

**Example** Examples of reimbursable expenses excluded from daily M&IE rates for which receipts are required:

- hotel, motel, or similar lodging costs
- taxi fares, airfare, train, or similar transportation fares
- telephone calls
- registration fees paid by the traveler
- vehicle rental
- airport parking

Examples of expenses that are unallowable and will not be reimbursed (and are not to be claimed on an invoice or travel voucher) are:

- alcoholic beverages
- flight insurance
- GPS device
- host/hostess gifts

### **Subcontractor Invoices**

For domestic travel, or when an exclusion from utilizing the PPPL Travel Office for international travel has been authorized in the subcontract or otherwise in advance by PPPL, travel can be performed that is not processed through the PPPL Travel Office and the travel expenses can be submitted for reimbursement by PPPL to the subcontractor through an invoice. When travel expenses are included on an invoice, they must be summarized with additional supporting documentation. The minimum level of documentation would include:

- Departure location-
- Destination location(s)-
- Lodging - Number of nights and daily rate(s)
- M&IE – Number of days and per diem rate(s)
- Transportation – Itemize air, train, bus, etc.
- Rental car-
- Conference Fee-
- Other miscellaneous-
- Total expenses
- Purpose of the trip

PPPL can provide a standard travel voucher form or the subcontractor can utilize their own form for this documentation.

### **Additional Requirement for Conference Attendance**

For the purposes of this document, a conference is defined as a meeting (other than routine meetings held for subcontract status review), seminar, retreat, symposium, workshop, or similar event that involves official travel. Official travel includes all travel where the related costs are expected to be reimbursed by or charged to DOE funds. Regardless of whether the travel is domestic or international, Subcontractor employee travel to conferences must be approved in writing, in advance, by the PPPL Travel Office.

### **Responsibility for International Travel Risk and Traveler Safety**

It is the responsibility of the Subcontractor to consider risks to their employees' health and safety prior to assigning staff to foreign travel, and to ensure that its employees who are assigned to travel abroad are properly insured and briefed on any safety and health issues that may arise in the countries they will visit. This includes responsibility for advising the employee of all travel risks and health related issues associated with the countries being visited, and confirming that the employee has received all necessary vaccines, and has adequate health insurance, including short-term medical evacuation coverage, good in all countries on their itinerary.

#### **Attachments:**

1. PPPL Travel Approval Form; Rev. 0, 10/08 (2 pages)
2. TAF-FTMS Input Form; Rev. 0; 10/08 (4 pages)
3. PPPL Travel Voucher (1 page)
4. PPPL Foreign Travel Trip Report (3 pages)

## PPPL Travel Services Travel Approval Form

Traveler: \_\_\_\_\_ Extension: \_\_\_\_\_

Destination: \_\_\_\_\_

Purpose: \_\_\_\_\_

Leave: \_\_\_\_\_ (Date) \_\_\_\_\_ (Time) If personal/vacation is being used in conjunction with business travel, specify these dates:

Return: \_\_\_\_\_ (Date) \_\_\_\_\_ (Time) \_\_\_\_\_

Arrangements Requested By: \_\_\_\_\_ Extension: \_\_\_\_\_ Date: \_\_\_\_\_

### COST ESTIMATE \*

Air  Train  Bus  Auto  \$0.00

Lodging:	Hotel 1 # Nights x Rate	Hotel 2 # Nights x Rate	Hotel 1 <u>\$0.00</u> Hotel 2 <u>\$0.00</u>
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Meals & Incidental Expenses:	No. of Days		x Rate		<u>\$0.00</u>
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Meals & Incidental Expenses:	No. of Days		x Rate		<u>\$0.00</u>
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Auto Rental: \$0.00

**Registration/Seminar Fees:**

- A. Amount to be prepaid by PPPL (attach completed registration forms) \$0.00
- B. Amount to be prepaid by the Traveler (paid receipts must accompany Travel Voucher) \$0.00

Other: Gas, Parking, Limo \_\_\_\_\_

**Total Estimate:** \$0.00

Cost Center: \_\_\_\_\_ Work Package: \_\_\_\_\_ Job Number: \_\_\_\_\_  
 Cost Center: \_\_\_\_\_ Work Package: \_\_\_\_\_ Job Number: \_\_\_\_\_

\_\_\_\_\_  
Authorized Cost Center Signature

### PPPL Travel Services Travel Approval Form

Trip #:

(To be Completed by the Travel Office)

Traveler's Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone \_\_\_\_\_

**Air Requirements - List One Preferred and One Alternate**

Date	From	To	Depart	Arrive	Special Requests

**Car Requirements**

City	Arrive	Depart

**Hotel Requirements - List One Preferred and One Alternate**

City	Arrival	Departure	Hotel/Room Type/ Special Request

Ticket Needed By: \_\_\_\_\_

**Additional Requirements**



## FTMS Input Form

This form is provided as a convenience for the collection of Foreign Travel Request Data. The form is intended for use as an offline resource to collect data necessary to support the Foreign Travel Management System (FTMS). Completion of the form is not considered sufficient in itself for satisfying DOE Order 551.1A; the data must still be entered into the FTMS for Department of Energy (DOE) tracking and monitoring. Specific questions on Foreign Travel or the completion of this form should be directed to the Senior FTMS Organization Point of Contact at PPPL (Connie Cummings)

FTMS Trip Number: \_\_\_\_\_

FTMS ID Number: \_\_\_\_\_

Name (Last, First, Middle) \_\_\_\_\_

Gender: M / F \_\_\_\_\_

Employer: \_\_\_\_\_

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

Employer Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Fax: \_\_\_\_\_

Home Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

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

Permanent Resident Green Card Holder: \_\_\_\_\_

Do you have a security Clearance? If Yes, please specify \_\_\_\_\_

# FTMS Input Form

FTMS Trip Number: \_\_\_\_\_

Place of Departure (City, State/Province, Country) \_\_\_\_\_

Departure Date: \_\_\_\_\_

Return Date: \_\_\_\_\_

Has the traveler contacted his/her Medical Support Staff to ensure awareness of safety and health issues in the country(ies) to be visited?

Yes No

\_\_\_\_\_

Will the traveler be taking DOE or Laboratory owned Equipment on this Travel? (Please specify, laptop, PDA, etc.)

Yes No

\_\_\_\_\_

**Estimated Travel Cost by Funding Type**

Primary Sponsor	Funding Type	Program Office	Funding Code	Title	Estimated Airfare	Estimated Other

Type of Travel

Airfare - Coach

Give Justification for Premium Travel:

\_\_\_\_\_

Org. Code Name and Organizations of Headquarters personnel with whom trip has been coordinated

SC Erol Oktay \_\_\_\_\_

Names and Organizations of other personnel with whom you are traveling as a team

\_\_\_\_\_

Benefit to the Government (Include benefit to present position and the Department)

\_\_\_\_\_

General comments regarding trip request - click for drop down list

\_\_\_\_\_

# FTMS Input Form

**TRAVEL REQUEST SECTION III - TRIP ITINERARY**

FTMS Trip Number: \_\_\_\_\_

If travelling to multiple destinations, please complete an Itinerary for each destination

Destination City: \_\_\_\_\_

Start Date: \_\_\_\_\_  
End Date: \_\_\_\_\_

Airline: \_\_\_\_\_

Is this trip associated with a conference?  Yes  No

If yes, complete the following information

Conference Name: \_\_\_\_\_  
Conference Sponsor: \_\_\_\_\_  
Conference URL/E-Mail: \_\_\_\_\_

Will anyone from a DOE-Designated Sensitive Country be in attendance at this conference?

Yes  No  Unknown

**Primary Purpose (Select one or more)**

- Profession Conference or Workshop
- Seminar/Symposium
- Working Group or Colloquia (scientific meeting)
- Site Visit
- R and D Activities under an Informal, Lab-to-Lab, or Government-to-Government Agreement
- Meeting(s) on Scientific, Technical, Project or Programmatic Matters
- Procurement-Related Matters
- Official Stop Over
- Personal Leave
- IAEA Travel
- Other(s)

List Other Primary Purpose

\_\_\_\_\_

Justify Trip Purpose (i.e., Topics to be Discussed, Formal Presentation or Paper)

\_\_\_\_\_

This Part of the trip involves:

Yes or No

	Lab-to-Lab Agreement?
	University-to-Lab Agreement?
	International Agreement - If yes, enter Agreement: _____
	Will Classified Information be Discussed?
	Will you be interacting with Anyone from a DOE-Designated Sensitive Country?
	Does this itinerary involve Training?
	Will any part of the trip discuss sensitive subjects as defined by DOE's Sensitive Subject List?
	Will any part of the trip involve information that is subject to US Export Control Restrictions?
	Meetings with Senior Government Officials?

Please Provide Official's name, position and contact information. Describe meeting goals.

\_\_\_\_\_

Embassy assistance Required?  Yes  No

If yes, describe: \_\_\_\_\_

Host Name	Host Phone	Affiliated Institution	Facility to be Visited	Date

After Hours Name	After Hours Phone

# FTMS Input Form

FTMS Trip Number: \_\_\_\_\_

Traveler's Signature: I certify that the information provided is correct and I understand that I must submit a trip report within 30-calendar days of my return.

Due Date for Trip Report: \_\_\_\_\_

\_\_\_\_\_  
Signature (Traveler)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Department Head)

\_\_\_\_\_  
Date

**Princeton Plasma  
Physics Laboratory**

**Travel Voucher**

Trip # \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Dates of Travel \_\_\_\_\_  
 Destination(s) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone # \_\_\_\_\_  
 Badge # \_\_\_\_\_  
 FTMS # \_\_\_\_\_

Accounting Approval \_\_\_\_\_  
 Phone # \_\_\_\_\_ Vendor # \_\_\_\_\_

Purpose: \_\_\_\_\_

**ALL ENTRIES MUST BE IN US \$**

Vacation Days Used: \_\_\_\_\_  
 Currency Conversion(s) used: \_\_\_\_\_

Links:  
 Foreign Currency Converter: <http://www.oanda.com/convert/classic>  
 Foreign Per Diem: <http://www.state.gov/m/a/als/prdm/2001/>  
 Domestic Per Diem: [Domestic Per Diem Rates](#)

	Leave:	Returned:		Leave:	Returned:		Leave:	Returned:	
Dates:									
	From:	To:		From:	To:		From:	To:	
Location:									
Departure/Arrival Times									
	Rate/ Amount	No. of Days		Rate/ Amount	No. of Days		Rate/ Amount	No. of Days	Total
Hotel:									
Hotel:									
Meals & Incidental Exp.:									
	# Miles	Rate:		# Miles	Rate:		# Miles	Rate:	
Private Auto Mileage:									
Auto From/To:									
Telephone Charges:									
Business:									
Personal:									
Airfare:									
Registration:									
Buses:									
Train:									
Taxi:									
Shuttle/Limo Services:									
Auto Rental:									
Gas:									
Tolls:									
Parking Fee:									
Currency Exchange Fee:									
Misc. Explain In Comments:									
Total Misc Charges:									
Total Charges:									

Account to Charge: \_\_\_\_\_  
 \_\_\_\_\_  
 Cost Ctr    Work Pkg    Job    Amount  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Cost Ctr    Work Pkg    Job    Amount  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Traveler's Signature: \_\_\_\_\_  
 \_\_\_\_\_  
 Authorized CC Signature \_\_\_\_\_  
 \_\_\_\_\_  
 Authorized CC Signature \_\_\_\_\_  
 \_\_\_\_\_

**Total Expenses**

Airfare	_____	_____
Cash	_____	_____
Hotel	_____	_____
Other	_____	_____
<b>Total Advances</b>	_____	_____
<b>Reimbursement Due to Employee</b>	_____	_____

Certification: I certify that this voucher is true and correct to the best of my knowledge, and that I have incurred these expenses while on official Laboratory business.  
 I further certify that payment or credit has not been received by me from other sources. Rev 03/01

**Comments:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## **Princeton Plasma Physics Laboratory Foreign Travel Trip Report**

### **Instructions for preparation of the Foreign Travel Trip Report:**

#### **Part 1:**

Part 1 of the trip report is to be an extract of the foreign travel request form, it should include an **abstract** of the results of the trip.

This will be forwarded to the Office of Science and Technical Information (OSTI), Oak Ridge, TN 37831.

Part 1 will not contain classified information.

Part 1 will be included in a limited-access electronic database available to DOE.

#### **Part 2:**

Part 2 of the trip report will provide a complete report on and thorough analysis of the trip.

Part 2 should include the results of any meetings of discussions with representatives of foreign government(s) and/or company(ies).

When more than one traveler follows the same schedule, only one member of the party needs to report on each meeting or event that took place.

When appropriate, part 2 should also include observations, conclusions, speculations and information relating to the safety, health and security of future travelers.

Part 2 of the trip report will be used for programmatic purposes and will not be forwarded to OSTI.

Part 2 of the trip report is to provide actual costs of the trip.

**Submit both parts as an email attachment to :**

**Ccumings@pppl.gov**

# Princeton Plasma Physics Laboratory Foreign Travel Trip Report

## Trip Report Part 1-

**Travel To:**

**Report Date:**

**Dates of Travel:**

**Traveler Information (All travelers on this trip)**

Last Name	First Name	Middle Name	Position/Title of Traveler

**Employing Organization:** Princeton Plasma Physics Laboratory

**Employment Address:** Post Office Box 451  
Princeton, NJ 08543

## Trip Itinerary

**FTMS Trip Number**

Destination/Organization	Facility	Facility Address

**Primary Topic (include justification from Foreign Travel Request)**

**Highlights/Benefits of Trip, People Contacted, Results of meetings or discussions, facilities visited and their locations**

Please continue to Part 2 on the next page

# **Princeton Plasma Physics Laboratory Foreign Travel Trip Report**

## **Trip Report Part 2**

**Travel to:**

**Report Date:**

**Dates of Travel**

**(dd,mm,yy-dd,mm,yy)**

**Result of meeting or discussions with representatives of Foreign Government(s) and/or company(ies)**

**Observations, Conclusions, Speculations & Information relating to Safety, Health & Security of Future Travelers**

**Total Cost to DOE**

**Non-DOE Funding Amount**