

**West Virginia University Airplane Reservation Form**

1. General business purpose for trip: Trip 1 - To provide clinical services in Southern West Virginia
2. Department contact/ phone number: Trip 1 - Star Hammond/ [REDACTED] Julie Peasak/ [REDACTED]
3. Destination airport (if known): Trip 1 - Charleston Airport  
Trip 2 - Morgantown Airport
4. Destination address: \_\_\_\_\_

Leg:	Trip date:	Departure City:	Departure Time:	Arrival City:
1	7/18/19	Morgantown, WV	7:00 am	Charleston, WV
2	7/18/19	Charleston, WV	7:00 pm	Morgantown
3				
4				

	Name	Cell number	Department	VP Division	Business Justification	Code
1	John Brick, MD	[REDACTED]	Neurology	WVUSoM	Clinical Services	3
2	Rodrigo Reyna, MS3	[REDACTED]	Neurology	WVUSoM	Clinical Services	3
3	Ryan Mezan, MS3	[REDACTED]	Neurology	WVUSoM	Clinical Services	3
4	Valerie Casuccio, MS4	[REDACTED]	Neurology	WVUSoM	Clinical Services	3
5					Clinical Services	3
6					Clinical Services	3

5. Lead passenger name / cell number: Trip 1 - John Brick [REDACTED]  
Trip 2 - John Brick [REDACTED]
6. Ground transportation:
  - No ground transportation required.
  - I prefer to set up my own ground transportation.
  - I prefer to have U Aviation set up ground transportation. Details: Will need to rent an Enterprise SUV, or Van and have it at the airport. There will be 4 people going.

7. Catering:
  - No catering required.
  - Catering is required. Details: Trip 1 & 2 snacks and beverages available

8. Signature of WVU President, Vice President, Chancellor or designee: [Signature] Date: 7/12/2019

For internal use: 9. Approved by WVU President's Office: <u>[Signature]</u> Printed name: <u>Amy Gabriel</u>	Date sent to U Aviation: <u>7/12/19</u> Updated: 12/29/2014
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