

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	10/17/2019	Morgantown, WV	7:00 am	Charleston, WV
2	10/17/2019	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	Judy Charlton, MD	[redacted]	Ophthalmology	WVUSoM	Clinical Services	3
3	Alec Statler, MS4	[redacted]	Neurology	WVUSoM	Clinical Services	3
4	<i>Sonia Chandi</i>		Ophthalmology	WVUSoM	Clinical Services	3
5				WVUSoM	Clinical Services	3
6				WVUSoM	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 LJ 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: 10/15/19

For internal use:	
9. Approved by WVU President's Office: <u><i>[Signature]</i></u>	Date sent to LJ Aviation: <u>10-15-19</u>
Printed name: <u>Amy Garbrick</u>	Updated: 12/29/2014