

## TRAVEL OUT OF WING PENNSYLVANIA WING REQUIREMENTS

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All travel outside of the Wing (air or ground) must be authorized by the Wing Commander and in some cases, regional or national authorities. IAW CAP Regulation 60-1, 2-5, flights out of wing are to be coordinated and authorized by the appropriate level of command depending on the geographic limits of the flight. Pennsylvania Wing members and assets will comply with the following in implementing reporting and authorization requirements for out of wing travel.

### 1. Travel to Contiguous States:

- A. Airports within 10 NM - Day trips (not overnight) to airports in contiguous states within 10 nm of the Pennsylvania border are authorized without prior notice or authorization. Longer stays or overnights require pre-approval as described below.
- B. Other - Trips to locations beyond the 10 NM limit or of longer duration than a few hours during the day, including any overnight stay requires pre-authorization. Pre-authorization for contiguous states can be accomplished by mailing, faxing or e-mailing a PAWG Form 99c or the equivalent information to Wing Headquarters at least 48 hours in advance of the trip. The 99c information must include:
- Requestor - Person requesting authorization, include contact numbers.
  - Date of Travel - include time of departure
  - Return Date - include estimated time of arrival
  - Aircraft/Vehicle - include ID number and owner
  - PIC/Driver/Crew - List all crew personnel, include contact numbers.
  - Mission Number/Mission Type (Symbol) - include both as well as why trip is necessary.
  - Passengers/Cargo - list all other personnel going along, seniors, cadets and others. List any cargo being transported.
  - Departure/Route/Destination - list departure point, route of travel, stops and destination. If the return trip will differ, list the return routing. List the destination. Include contact and recall numbers. For stays including overnights, list where you will be staying.
  - Travel or Overnight (RON) Justification - list the reason for the travel (mission) including the benefit to CAP. If it is necessary to Remain OverNight (RON) enter the justification here as well.

As long as the request for authorization arrives at Wing HQ 48 or more hours in advance, these missions are to be considered approved without receiving signed authorization. If there are questions regarding the information provided, Wing HQ will contact you at one of the contact numbers provided above. If the request is not received at HQ at least 48 hours in advance, the trip is not authorized unless you make positive contact with Wing HQ to ascertain it has been received, reviewed and approved.

2. Travel to Wings within the Region –

A. Trips to Wings within the North East Region will be handled according to the requirements in 1.B. above.

B. PAWG Form 10 – Some trips require liaison (State Director) office intervention and approval. Trips requiring military facilities or travel in military vehicles or aircraft are examples of these missions. Billeting, food support, military travel, use of BX facilities, etc all require additional CAP and State Director approval and support. Often additional information or justification is needed. In these cases, a PAWG Form 10 is required to provide all involved with the information, justification and contact numbers necessary to make the travel plans come together and authorize the trip. For travel on Military Airlift a CAPF72 must accompany the PAWG F10. These forms must be COMPLETE and submitted at least 45 days in advance to Wing HQ. Please keep in mind that this is the minimum amount of time required. Some trips requiring more complex arrangements may require additional time. For the trip to be authorized, the Group, Wing and other appropriate offices must approve the completed PAWG Form 10. The signed form must be returned to you from Wing HQ prior to departure for the trip to be.

3. Travel outside of the Region – trips outside of the region must be coordinated and approved by the Wing Commander and the Region Commander. In some cases, the State Directors office and or national authority must be sought. Wing HQ will determine for you what authorizations will be needed and route the request to the proper authorities for you. To do this the following will be needed, at minimum.

A. PAWG Form 99c - Trips to locations outside of the North East Region, including any overnight stay requires pre-authorization. Pre-authorization can be accomplished by mailing, faxing or e-mailing a PAWG Form 99c or the equivalent information to Wing Headquarters at least 30 days in advance of the trip. The 99c information must include:

- Requestor – Person requesting authorization, include contact numbers.
- Date of Travel – include time of departure
- Return Date – include estimated time of arrival
- Aircraft/Vehicle – include ID number and owner
- PIC/Driver/Crew – List all crew personnel, include contact numbers.
- Mission Number/Mission Type (Symbol) – include both as well as why trip is necessary.
- Passengers/Cargo – list all other personnel going along, seniors, cadets and others. List any cargo being transported.
- Departure/Route/Destination – list departure point, route of travel, stops and destination. If the return trip will differ, list the return routing. List the destination. Include contact and recall numbers. For stays including overnights, list where you will be staying.

- Travel or Overnight (RON) Justification – list the reason for the travel (mission) including the benefit to CAP. If it is necessary to Remain OverNight (RON) enter the justification here as well.

These missions require signature authorization. You must receive a signed, authorized copy of your form back from Wing HQ before you can be released to depart. If there are questions regarding the information provided, Wing HQ will contact you at one of the contact numbers provided above. If the request is not returned to you by Wing HQ with all of the required signatures, the trip is not authorized.

- B. PAWG Form 10** – Some trips require liaison (State Director) office intervention and approval. Trips requiring military facilities or travel in military vehicles or aircraft are examples of these missions. Billeting, food support, military travel, use of BX facilities, etc all require additional CAP and State Director approval and support. Often additional information or justification is needed. In these cases, a PAWG Form 10 is required to provide all involved with the information, justification and contact numbers necessary to make the travel plans come together and authorize the trip. For travel on Military Airlift a CAPF72 must accompany the PAWG F10. These forms must be COMPLETE and submitted at least 45 days in advance to Wing HQ. Please keep in mind that this is the minimum amount of time required. Some trips requiring more complex arrangements may require additional time. For the trip to be authorized, the Group, Wing and other appropriate offices must approve the completed PAWG Form 10. The signed form must be returned to you from Wing HQ prior to departure for the trip to be authorized.

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- \* CAP Reg 10-3 TA & MSA Required on specific trips  
TA (Travel Authorization) & MSA (Military Support Authorization) are coordinated, written and approved through the SD/DSD (WING LIAISON OFFICE) TO NELR TO CAP-USAF.

**Headquarters, Pennsylvania Wing, Civil Air Patrol  
United States Air Force Auxiliary**



**REQUEST FOR TOURS / VISITS**

NAME OF UNIT REQUESTING TOUR:		UNIT NO:
DATE OF REQUEST:	TOUR REQUESTED:	
SIGNATURE OF UNIT COMMANDER:		
PRINT NAME OF UNIT COMMANDER:		

DATE OF TOUR: LEAVING	RETURNING:	
DEPARTING FROM	RETURNING TO:	
NUMBER OF SENIORS:	MALE	FEMALE:
NUMBER OF CADETS:	MALE	FEMALE:
TOTAL NUMBER ATTENDING TOUR:		

TYPE OF TRANSPORTATION REQUESTED:

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IF AIRLIFT OR OTHER USAF TRANSPORTATION IS NEEDED, GIVE ALTERNATE DATES:

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BILLETING DESIRED:	NUMBER OF NIGHTS:
MESSING ON BASE:	NUMBER OF MEALS:
SPECIFY DATES AND TIMES MEALS WILL BE NEEDED:	
SPECIAL CONSIDERATIONS, EXPLAIN:	

SIGNATURE OF UNIT COMMANDER:	DATE:
SIGNATURE OF GROUP COMMANDER:	DATE:
PRINTED NAME AND GRADE OF GROUP COMMANDER:	

**FORM MUST BE SUBMITTED TO WING AT LEAST 45 DAYS PRIOR TO TOUR / VISIT DATE**

**TO BE COMPLETED BY WING HEADQUARTERS**

DATE REQUEST RECEIVED:

RECEIVED BY:

MILITARY SUPPORT AUTHORIZATION NEEDED:

YES

NO

APPROVED

DISAPPROVED

DATE:

SIGNATURE OF WING COMMANDER:

DATE:

DATE FORWARDED TO LIASON OFFICE:

TYPE OF ACTION REQUIRED BY LIASON OFFICER:

COMMENTS



# REQUEST FOR TRAVEL AUTHORIZATION

Requestor	
Date of Travel	Return Date
Aircraft/Vehicle	
PIC/Driver Crew	
Mission No. Type	
Passengers Cargo	
Departure Route Destination	
Travel or Overnight (RON) Justification	

## ENDORSEMENTS

Required for out-of-state travel	
Wing CC	Date

Required for out-of-region travel	
Region CC	Date

Required for funded overnight (RON) activities	
CAP/USAF LO	Date

<b>CAP MILITARY AIRLIFT (MILAIR) REQUEST FORM</b>					
<b>1</b>	<b>TO:</b>	<b>2</b>	<b>FROM:</b>		
<b>3</b>	<b>FLIGHT ITINERARY (See Note a)</b>				
LEG	DATE	DEPARTURE STATION	TIME	ARRIVAL STATION	TIME
A					
B					
C					
D					
<b>4</b>	<b>PASSENGER LIST (See Note b)</b>				
NAME	GRADE	BRANCH			
<b>5</b>	<b>PURPOSE OF TRAVEL</b>				
<b>6</b>	<b>FLYING UNIT/POC/DSN/REQUIREMENTS (See Note c)</b>				
<b>7</b>	<b>GROUP LEADER (See Note d)</b>				
NAME	WORK PHONE/FAX	HOME PHONE (AREA CODE + NO.)			
<b>8 CAP-USAF AIRLIFT COORDINATOR SIGNATURE (See Note e)</b>					
<b>NOTES:</b>					
a. (Block 3) Provide the actual airport or military installation, and the state. Use local times.					
b. (Block 4) List senior traveler first. List the first five passengers on this worksheet and attach a separate listing of all other passengers.					
c. (Block 6) List flying unit, point of contact, DSN phone number and any requirements the unit may have (man-days, per diem, opportunity number, etc.).					
d. (Block 7) Group leader's name, work and home phone numbers, and fax number, if available. If the group leader is not known at the time this form is completed, leave this block blank. When the group leader is identified, call HQ CAP-USAF/XOO and the validator will fill in the information.					
e. (Block 8) LR airlift coordinator's signature and signature block.					