



# Colorado State University TEM Customer Form

## Traveler Information

Full Name (First/MI/Last): \_\_\_\_\_

Address (Street Address/Apt Unit): \_\_\_\_\_

Address (City/State/Country/Zip Code): \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Current Valid Email Address: \_\_\_\_\_

Emergency Contact Name/Phone #: \_\_\_\_\_

**Traveler Type:** CSU Employees do not complete this form, create an employee TEM profile from KIM

Non-Employee: \_\_\_\_\_ CSU Student, Enter CSU Student ID: \_\_\_\_\_

## Traveler Citizenship Information

Are you a U.S. Citizen? If no, please answer the traveler questions below:      YES      NO

What is your country of citizenship: \_\_\_\_\_

Are you a nonresident alien for tax purposes? \_\_\_\_\_

Visa Type: \_\_\_\_\_

Describe the Purpose of Travel:

## Department Information

Initiator Name (First/MI/Last): \_\_\_\_\_

Department Name/Number: \_\_\_\_\_

Initiator Email: \_\_\_\_\_

Please email the completed form to [BFS\\_TEM\\_Customer@mail.colostate.edu](mailto:BFS_TEM_Customer@mail.colostate.edu) for processing