



AIM Coordinator (tw-1)
 U.S. Coast Guard Academy
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Privacy Act Statement. In accordance with 5 USC 552a(e)(3), the following information is provided to you when supplying personal information to the USCG.

(1) Authority which authorizes the solicitation of the information: 14 USC 182.
 (2) The Principal Purpose for this information is to ensure that an accurate travel method is collected (and utilized) for all applicants during any USCGA Programs. (3) Routine uses which may be made of the information: As background on applicants for the selection process; to contact the applicant; to determine if there are existing USCG records on the individual; in performance of the duties of officials and employees of the USCG in managing all Campus Programs. (4) Disclosure of the information is voluntary, but the applicant will not be considered further for scholarship benefits if the information is not provided.

Please email this form to the AIM Coordinator at aim@uscga.edu; ONLY if you have modified your original travel plans.

Students Name: _____

Last Name

First Name

Cell Phone

Please ensure you can be reached at this number during your travels

The information provided on this form will allow the Academy to coordinate transportation and ensure the safe arrival and departure of the programs participants.

ARRIVAL DATE: _____

MODE OF TRAVEL (choose one):

Car - Drivers Name: _____

Air - Arriving Airport:

Providence - PVD

Bradley - BDL

Other (list) - _____

Airline	flight #	arrival time

Train - New London Station:

Amtrak

Other (list) _____

train #	arrival time

Arriving by Bus/Ferry (location):

Bus

Ferry

DEPARTURE DATE: _____

Will you require CGA provided shuttle transportation? (select all that apply)

To the Academy

From the Academy

None