

TRAVEL OUTBRIEF

Please answer the questions below and submit to your FSO. If you answer YES to any of the questions please explain your answer. Use additional pages if necessary.

Traveler Name:

1. Were any problems encountered at the time of arrival or departure from the foreign country/countries visited? YES NO

If YES please explain:

2. Did you have any unusual experiences while traveling to include harassment, suspected surveillance, detention, unusual customs inspection, searches of hotel room or trash, listening devices found, telephone monitoring? YES NO

If YES please explain:

3. Any travel restrictions imposed by the country during your visit? Were there any abrupt changes made in the itinerary? YES NO

If YES please explain:

4. Were any probing inquiries made relative to your job duties, studies, and/or company or organization? YES NO

If YES please explain:

5. Were there any blatant indications of possible approach/efforts to compromise by a foreign intelligence service? YES NO

If YES please explain:

6. Did you meet a foreign national who requested future contact? YES NO

If YES please explain:

7. Were you a victim of a criminal act? YES NO

If YES please explain:

8. Were you detained or arrested? YES NO

If YES please explain:

9. Did you witness any acts that may be considered terrorist-like? YES NO

If YES please explain:

10. Were you approached by anyone offering to exchange currency? YES NO

If YES please explain:

11. Did you lose/misplace any official materials or personal luggage? YES NO

If YES please explain:

12. Did you take any personal pictures of foreign government, military installations, or equipment? YES NO

If YES please explain:

Additional information may be requested based on the information provided above. Your security officer will advise if this is necessary.

Traveler Signature:

Printed Name:

Date:

This form must be reviewed and signed by cognizant security officer.

FSO Signature:

Printed Name:

Date:
