

**LICKING COUNTY MUNICIPAL COURT ADULT PROBATION DEPARTMENT**

**Travel Request Form**

Traveling out of the State of Ohio is a privilege not a right while under community control supervision. Ohio Revised Code Section 2929.25 (C) (2). **Do not purchase non-refundable tickets prior to obtaining permission to travel.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street: \_\_\_\_\_ City, State, & Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Approximate Cost of Trip: \_\_\_\_\_ Source of Funds for Trip: \_\_\_\_\_

Case Number: \_\_\_\_\_ Charge: \_\_\_\_\_

Probation Officer:  Barnard  Dutro  Foster  Guisinger  Vincent  Weaver

Court Costs/Fines Paid:  Yes  No Pending Cases:  Yes  No

Pending Probation Revocation:  Yes  No Out on Bond:  Yes  No

**Destination:**

Street: \_\_\_\_\_ City, State, & Zip: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Purpose of Trip: \_\_\_\_\_

Persons Traveling With: \_\_\_\_\_

**Accommodations (will be verified):**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Mode of Transportation:**

Car/Truck  Bus/Train (itinerary needed)  Ship (itinerary needed)  Airplane (itinerary needed)

**Other Information:** \_\_\_\_\_

Permission Granted  Permission Denied (Reason if denied: \_\_\_\_\_)

**Initial Approval By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Supervising Probation Officer

Permission Granted  Permission Denied (Reason if denied: \_\_\_\_\_)

**Final Approval By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Director of Adult Probation or Designee

**DEFENDANT NOTIFIED OF DIRECTOR/DESIGNEE'S DECISION BY SUPERVISING PROBATION OFFICER:**

YES via  Phone and/or  Email on DATE: \_\_\_\_\_  NO REASON: \_\_\_\_\_