WESTERN DISTRICT OF PENNSYLVANIA

APPLICATION TO TRAVEL

IMPORTANT: YOUR WRITTEN APPLICATION FOR ALL TRAVEL MUST BE RECEIVED BY YOUR PROBATION OFFICER 10 DAYS IN ADVANCE OF EACH REQUESTED TRIP.

NO OUT-OF-DISTRICT TRAVEL IS PERMITTED DURING THE FIRST 60 DAYS OF SUPERVISION.
DATE: (mm/dd/yyyy)
NAME:
ADDRESS:
WERE FINES, COSTS, RESTITUTION, AND/OR ANY OTHER PAYMENT ORDERED BY THE COURT AS A CONDITION OF YOUR SUPERVISION?
Yes No
IF YES, HOW MUCH DO YOU OWE ON EACH
I REQUEST PERMISSION TO TRAVEL TO:
TRAVEL DATES Leaving:
Returning:
I WILL BE STAYING AT:
THE PURPOSE OF THE TRIP:
ESTIMATE COST OF TRIP:
IF TRIP IS PAID FOR BY SOMEONE ELSE, EXPLAIN:

TRAVEL COMPANIONS, IF ANY:	
NAME:	
ADDRESS:	
RELATIONSHIP:	
MEANS OF TRANSPORTATION: (Vehicle desc	cription and tag no.; Airline/Airport, Flight Nos., Time, etc.)
<u>AGREEMENT</u>	
INCLUDING TEMPORARY RESIDENCE, PER REQUESTED BY THE PROBATION OFFICE.	R UPON MY RETURN, A RESUME OF MY ITINERARY, RSONAL CONTACTS, AND ANY OTHER INFORMATION . I ACKNOWLEDGE THAT FAILURE TO COMPLY WITH IL OF FUTURE TRAVEL REQUESTS OR REVOCATIONS
APPLICANT'S SIGNATURE	DATE
APPROVED	DENIED
SUSPO'S REVIEW:	
TO BE COMPLETED BY PROBATION OFFIC	CER ONLY:
SPECIAL INSTRUCTIONS:	