

TRAVEL REQUEST FORM

Date: _____

Name: _____ Phone: (____) _____

Address: _____ City, State & Zip: _____

Destination (City & State): _____ County: _____

Departure Date: _____ Return Date: _____

Purpose of Trip (In Detail): _____

Person(s) traveling with you: _____ Relationship: _____

Accommodations: (will be verified)

Place where staying: _____ Address: _____

City, State & Zip: _____ Phone: (____) _____

Mode of Transportation

Vehicle (Year, Make, Model & Color): _____

Tag Number: _____ Owner of Car: _____

Airline: _____ **Note: A travel permit must be approved prior to making airplane flight reservations.**

Departure Flight Time: _____ Arrival Time: _____ Flight #: _____

Departure Flight Time: _____ Arrival Time: _____ Flight #: _____

Other Mode of Transportation (specify): _____

Signature: _____

APPROVED BY: _____ DATE: _____

Please Return To:

Columbus

U.S. Probation Department
U.S. Courthouse
85 Marconi Blvd. Rm 546
Columbus, OH 43215
Phone: 614-719-3100
Fax: 614-469-2579

Dayton

United States Probation
U.S. Courthouse and Federal Building
200 West Second Street, Room 702
Dayton, OH 45402
Phone: 937-512-1450
Fax: 937-512-1453

Cincinnati

United States Probation
Potter Stewart U.S. Courthouse
100 East Fifth Street, Room 110
Cincinnati, OH 45202
Phone: 513-564-7575
Fax: 513-564-7587