



# Sixty-Sixth District Court of Michigan

110 E. MACK STREET – COUNTY BUILDING  
CORUNNA, MI 48817  
989-743-2395 – Clerks Office  
989-743-2261 – Probation Dept.

HON. WARD L. CLARKSON  
*District Judge*

DANIEL J. NEES  
*Court Administrator/Magistrate*

## TRAVEL REQUEST FORM

Case # \_\_\_\_\_ Date Submitted: \_\_\_\_\_

I, \_\_\_\_\_ request permission to travel to \_\_\_\_\_  
(Name) (Address)  
\_\_\_\_\_ on \_\_\_\_\_, returning on \_\_\_\_\_  
(Date & Time) (Date & Time)

for the purpose of \_\_\_\_\_  
(Reason for Travel)

I will submit to testing at \_\_\_\_\_  
(Testing Agency Name, Address & Phone #)

and have already confirmed this testing meets the criteria of my probation terms.

If my travel request is granted, I agree to depart and return on the dates and times indicated above. I understand that failing to comply with the terms of this request could result in a violation of probation.

\_\_\_\_\_  
(Defendant Signature) (Defendant Phone #) (Date)

REQUEST TO TRAVEL IS: APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

\_\_\_\_\_  
(Probation Officer Signature) (Date)

Additional conditions set by the Court regarding travel: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_