



County of Lawrence

President Judge
J. Craig Cox

Adult Probation & Parole
James R. Jendrysik, Chief

TRAVEL PERMIT

NAME: _____ DATE: _____

ADDRESS: _____

OFFENSE: _____

DESTINATION INFORMATION

PERSON/PLACE TO BE VISITED: _____

ADDRESS: _____ TELEPHONE: _____

_____ PURPOSE: _____

DATES REQUESTED: LEAVE: _____ RETURN: _____

METHOD OF TRAVEL: _____

IF AUTOMOBILE: YEAR: _____ MAKE: _____ MODEL: _____

ACCOMPANIED BY: _____

OFFICERS RECOMMENDATION

RECOMMENDED BY: _____ DATE: _____

SPECIAL INSTRUCTIONS: _____

NEXT REPORT: _____

APPROVAL/DISAPPROVAL

APPROVED: _____ LEAVE: _____ RETURN: _____

DISAPPROVED: _____ REASON: _____

AUTHORIZED SIGNATURE

DATE