



## Travel Pass Request

Participant name: \_\_\_\_\_ Pass date(s): \_\_\_\_\_

Address where you will be staying: \_\_\_\_\_

With whom will you be staying: \_\_\_\_\_

Reason for pass: \_\_\_\_\_

Participant Phone Number: \_\_\_\_\_

Alternate phone of someone with participant on pass: \_\_\_\_\_

- All passes are for clients who are currently in good standing with Recovery Court and partner agencies.
- All passes must be approved through the Recovery Court Team. If unauthorized passes are taken, you will be in violation of program rules and a violation warrant may be issued.
- All passes must be submitted to your Probation Officer 24 hours prior to the next court date.

What strategies will you use to avoid risky situations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional information you'd like the team to know: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Approval: \_\_\_\_\_ Date: \_\_\_\_\_