

# TRAVEL REQUEST FORM

MIDLAND COUNTY DRUG COURT  
JUDGE ELIZABETH N. RAINEY  
500 N. Loraine  
Midland, Texas 79701



Participant Name: \_\_\_\_\_

Court: \_\_\_\_\_ Phase: \_\_\_\_\_ Sober Date: \_\_\_\_\_

**To be considered for a travel permit or curfew extension, provide all information below and return to your Probation Officer at least one week before requested travel dates.**

Reason for travel/curfew extension: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Beginning Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Destination: \_\_\_\_\_ Method of Travel: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State: \_\_\_\_\_

Name and Phone Number of Person Who Will Be With You: \_\_\_\_\_

Other People Travelling With You: \_\_\_\_\_

I am in compliance with court rules and requirements (*i.e.*- attending treatment, recovery group meetings, and peer support, current on fees, completed community service hours, and participating in prosocial activities)

Yes: \_\_\_\_ No: \_\_\_\_ If No, then why should the court grant your request? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

All information provided above is true and correct to the best of my knowledge.

I understand my responsibilities to the court and the possible sanctions should I fail to comply.

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

Probation Officer Signature: \_\_\_\_\_ Received Date: \_\_\_\_\_

**For MCDC Team Use:** Submitted Timely: Y / N In Compliance: Y / N Recommendation of Officer: Y / N  
Comments: \_\_\_\_\_  
\_\_\_\_\_