



Sixty-Sixth District Court of Michigan

PROBATION DEPARTMENT
110 E. MACK STREET - COUNTY BUILDING
CORUNNA, MI 48817
TELEPHONE (989) 743-2261
FAX (989) 743-2332

HON. WARD L. CLARKSON
District Judge

STEPHANIE HARTZ
Chief Probation Officer

MICHAEL HERENDEEN
Court Administrator/Magistrate

SAMANTHA NEILSON
Probation Officer

Travel Request Form

Date Submitted: _____

Name: _____ Case Number: _____

Destination: _____
(Name) (Address) (Phone Number)

Departing Date: _____ Return Date: _____
(Day/Date/Time) (Day/Date/Time)

Reason for Travel: _____

If you have been ordered by the court to alcohol and/or drug testing, it is your responsibility to find a testing agency that meets the criteria of your probation terms.

Testing Agency: _____
(Name) (Address) (Phone Number)

If your travel request is granted, you are agreeing to depart and return on the dates and times you indicated above. If you fail to comply with the terms of this request, you will be in violation of your probation. **ALL TERMS OF PROBATION REMAIN IN PLACE.**

(Signature) (Name Printed) (Phone Number)

Request to travel is: Approved Denied Reason Denied: _____

Probation Officer Signature and Date: _____

Additional Comments/Stipulations: _____

