

Travel Permit

Permission is hereby granted to: _____, of
(Name of juvenile)

(Street address) (City) (State) (Zip)

Race: _____ Date of Birth: _____ SSN: _____

Travel to: _____

Juvenile is traveling with: _____

Method of Travel: _____
(Examples: automobile, plane, train, bus, etc)

(Specify tag number, flight number, etc)

For purpose of: (circle one) Vacation Family Visit Business
Other: (specify) _____

Juvenile will leave on: _____ and return by: _____
(Date) (Date)

Special Instructions/Conditions: (if applicable)

Permit Issued by: _____ Phone: _____
(Community Supervision Officer) (Agency phone)

(Community Supervision Agency name and address) Date issued: _____
(Date)

****YOUR COPY OF THIS TRAVEL PERMIT MUST BE RETURNED TO THE
ISSUING OFFICER WITHIN 48 HOURS AFTER RETURN TO KANSAS ****
PERMIT RETURNED ON _____
(Date)

Juvenile: _____ Date: _____
(Signature)

Community Supervision Officer: _____ Date: _____
(Signature)