

**UNITED STATES DISTRICT COURT  
OFFICE OF THE PROBATION OFFICER  
DISTRICT OF RHODE ISLAND**

**2 Exchange Terrace - 3rd Floor  
Providence, RI 02903  
TEL.: (401) 752-7300  
FAX: (401) 752-7399**



**BARRY J. WEINER  
Chief Probation Officer**

***TRAVEL REQUEST/AUTHORIZATION FORM***

Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No. \_\_\_\_\_  
Destination: \_\_\_\_\_  
Departure Date: \_\_\_\_\_  
Return Date: \_\_\_\_\_  
Purpose of Trip: \_\_\_\_\_  
Persons Accompanying: \_\_\_\_\_

Accommodations (will be verified):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Mode of Transportation:

Vehicle:      Make & Model: \_\_\_\_\_  
                    Plate Number: \_\_\_\_\_  
                    Owner: \_\_\_\_\_

Airline/Rail/Bus:  
                    Carrier Name: \_\_\_\_\_  
                    Departure No. & Time: \_\_\_\_\_  
                    Return No. & Time: \_\_\_\_\_

Other Mode of Transportation (specify type, date, time & excursion no.): \_\_\_\_\_

(Please submit all travel requests two weeks in advance so that plans can be investigated)