

# **Fayette County DUI Court Participant Travel Request Form**

## **PURPOSE/SCOPE:**

The purpose of this policy is to provide a set number of approved travel requests per participant in Fayette County DUI Court.

Travel requests will be considered for limited purposes, including but not limited to, business travel, faith-based retreats, and missionary public service.

Family emergencies involving immediate family members that require permission to travel will be handled on a case by case basis. Approval or denial of the requested travel is at discretion of the DUI Court Team. The DUI Court Team will take into consideration whether or not a participant is engaged in treatment, recent sanction history, sobriety date, and any other information pertinent in making a sound decision in approving travel. A family emergency in this case is defined as hospitalization, critical care, or death of a spouse or immediate family member(s) to include the following: mother, father, sister, brother, son, daughter, grandparents, mother-in-law, and father-in-law ONLY.

## **PROCEDURE:**

To consider a travel request, a participant must submit a written Travel Request to his/her counselor and the DUI Court Coordinator, at least two weeks prior to his/her requested travel, unless it is emergency leave. The Travel Request must include reason for travel, the exact address of the location Participant will stay, a phone number at the location where the Participant will stay, and the date of departure and date of return.

Team members will consider the travel request during the staffing review. The DUI Court team will consider recent progress and participation in the program, as well as, sanction history in determining whether to approve or disapprove the request.

If travel is approved, the participant will be required to meet with his/her counselor to discuss how to maintain sobriety/drug free during travel. All participants who are approved for travel will be required to provide a drug screen the day prior to the beginning of travel **AND** the day after the approved travel ends, at the treatment center or to probation. Please note that the participant maybe liable to cover the costs of drug testing while traveling.

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Print Name	Signature	Date
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Print Name	Signature of DUI Court Coordinator	Date
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