

**Pulaski County District Court
DWI Court
3001 W. Roosevelt Rd.
Little Rock, AR 72204
Phone 501-340-6813 Fax 501-340-6788**

TRAVEL REQUEST FORM

Participant Name: _____

Destination: _____

Traveling with: _____

(Full Name and Contact Phone No.)

Method of Travel (Include flight, bus, train numbers, vehicle make/model/tag): _____

Departure Date: _____ Return Date: _____

Address where staying: _____

Name/Phone Number of person(s) staying with you: _____

Team Approved/Denied: _____