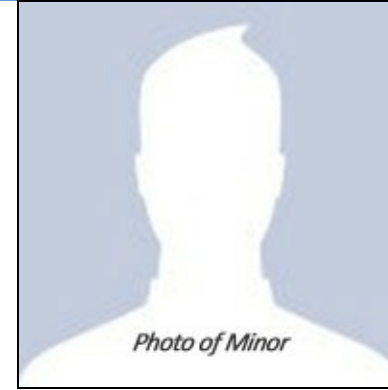


**UC Basic Information**

**First Name:**

**Last Name:**



**AKA:**

**Status:**

**Date of Birth:**

**A No.:**

**Age:**

**Country of Birth:**

**Gender:**

**LOS:**

**Current Program:**

**Admitted Date:**

**UC Long Term Foster Care Travel Request**

**Requester Information**

**Date of Travel Request:**

**(Travel Request form must be submitted to DUCS at least 10 business days prior to travel start date)**

**Name and Contact Information of Individual Completing Travel Requests:**

**Name:**

**Telephone**

**Email :**

**Travel Overview**

**Travel Begin Date:**

**Travel End Date:**

**Name of Individual child will be traveling with**

**Relationship to child:**

**Contact # while on travel:**

**Address where child will be staying while on travel**

**Mode of Transportation**

**Mode of transportation:**

**Include airline, flight #'s, bus company, train info as applicable:**

**Personal Vehicle Travel**

**Type of automobile: Make**

**Model:**

**License Plate**

**Car Insurance Company**

**Primary Driver: Name**

**Driver's license #:**

**Issuing state:**

**Policy Number:**

**Approval Determination Factors**

**Reason travel request is being submitted to ORR/DCS for approval:**

**Is this travel request in accordance with state guidelines?**

Yes  No

**If no, please explain**

**Purpose of travel/trip summary**

**Child Supervision Plan**

**Are there any identified safety concerns in this child's background?**

Yes  No

If yes, please explain

Is there any indication of flight sick?

Yes  No

If yes, please explain

Comment

Date

Signature (ORR Official)