GRAND TRAVERSE BAND OF REQUEST			TC	TRAVEL	CASE NO.		
					BOND only		
INDIANS TRIBAL COURT (before sentencing)							
2605 N. WEST BAY SHORE DRIVE, PESHAWBESTOWN, MI 49682 (231)534-7050 TribalCourt@gtb-nsn.gov (231)534-7051 fax Petitioner name, address, phone number Respondent name, address, phone number							
Petitioner name, address, phone number GRAND TRAVERSE BAND OF OTTAWA AND Respondent name, address, ph						, address, phone number	
CHIPP	EWA INDIA	NS					
				VS			
Petitioner attorney/lay advocate name, address, phone number					Respondent attorney/lay advocate name, address, phone		
Tribal Prosecuting Attorney					number		
2605 N. West Bay Shore Drive Peshawbestown, MI 49682							
(231) 534-7637							
NOTE: This form is intended for use in criminal and Juvenile cases only. This form does not apply to ICW cases.							
1.	1. In this case, I am the Defendant parent/guardian/legal custodian of the Juvenile.						
2.	The above-named Defendant or Juvenile is released on bond status.						
3.	I am requesting permission of the Tribal Court to allow the above-named Defendant/Juvenile to travel outside the six-county						
4	service area during the dates/times outlined below.						
4.	The following are details of my travel: a. Anticipated date and time of departure:						
	a. Annelpace date and time of departure.						
	b. Anticipated date and time of return:						
	c. Reason for travel:						
	d. Names of all person's Defendant/Juvenile will be traveling with:						
	e. Phone number(s) where Defendant or parent/guardian/custodian can be reached during travels:						
	f. Address(es) and phone number(s) where I will be staying including city, state, ZIP:						
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5.	I understand and agree that unless the Court indicates that no testing is required, the Defendant/Juvenile will be required to ta daily PBT's while on travel and will be required to take a PBT and drug test and pay the costs thereof at New Direction the ne						
	business day after returning during facility testing hours. I understand and agree that it is the Defendant of						
	parent/guardian/custodian of the Juvenile's responsibility to make arrangements for PBT testing at the location where the						
6.	Defendant or Juvenile will be traveling, and to obtain written verification of the testing results for submission to the Court. I certify under penalty of perjury that the statements above are true to the best of my knowledge, information, and belief.						
0.	i certify und	ier penany or perjury in	at the statements abo	ive a	ie true to the best of	my knowledge, information, and benef.	
Dated:							
					Defendant or Par	rent/Guardian/Custodian of Juvenile	
If request is not submitted at least 48 hours in advance of travel, the request may not be reviewed/approved. Defendant / Juvenile must							
stay in the 6-county area. If Defendant / Juvenile is on Bond status, Prosecutor response is required. (Defendant / Juvenile is responsible for obtaining response.)							
Ц	No Objection						
	Request He	aring:					
	Dated: Prosecutor Signature:						
			<u>O</u>	RDE	<u>R</u>		
It is here	eby ordered:						
						l take daily PBT tests (between 6:00 – 9:00	
	am) while on travel and shall submit written verification of said testing to the Tribal Court by the next business day after returning from travel. Further, Defendant / Juvenile shall submit to a drug test at New Direction the next business day following the return from travel during facility testing hours. All other bond conditions shall remain in full force and effect.						
	Request to Travel is approved. No testing required. All other bond conditions shall remain in full force and effect.						
	Request to Travel is denied for the following reasons:						
	Other:						
	Other:						
Б			m 11 1 2 -				
Dated:			Tribal Court Ju	ıdge:			