



# INTERSTATE COMPACT FOR JUVENILES

## FINAL TRAVEL PLAN

### JUVENILE INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Home/ Demanding State: \_\_\_\_\_ Holding State: \_\_\_\_\_  
DOB: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Run Risk? \_\_\_\_\_  
Return Type: \_\_\_\_\_ Method of Transportation: \_\_\_\_\_  
Behavioral/Physical Problems: \_\_\_\_\_  
Medications: \_\_\_\_\_  
Clothing: \_\_\_\_\_  
Departure City: \_\_\_\_\_ Destination City: \_\_\_\_\_  
Departure Date: \_\_\_\_\_ Arrival Date: \_\_\_\_\_ Date Travel Plan Submitted: \_\_\_\_\_

### AIRPORT TRANSPORTATION AND FLIGHT DETAILS

#### Contact Information and Details for Transporting Juvenile to Departing Airport:

#### Contact Information and Details for Transporting Juvenile from Destination Airport:

#### Flight 1

Departure Airport: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Flight Number: \_\_\_\_\_  
Arrival Airport: \_\_\_\_\_ Arrival Time: \_\_\_\_\_  
Layover State: \_\_\_\_\_ Airport Supervision Confirmed? \_\_\_\_\_

#### Flight 2

Departure Airport: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Flight Number: \_\_\_\_\_  
Arrival Airport: \_\_\_\_\_ Arrival Time: \_\_\_\_\_  
Layover State: \_\_\_\_\_ Airport Supervision Confirmed? \_\_\_\_\_

#### Flight 3

Departure Airport: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Flight Number: \_\_\_\_\_  
Arrival Airport: \_\_\_\_\_ Arrival Time: \_\_\_\_\_

### GROUND TRANSPORTATION DETAILS

#### Contact Information and Details for Escort/Agency Transporting Juvenile via Ground Transportation: