

APPLICATION FOR GRADUATION AND PLACEMENT TO PHASE 5

Name: _____

Date Turned in: _____

Current Address: _____

Phone: _____

Email: _____

*YOU MUST MEET THE FOLLOWING CRITERIA TO BE CONSIDERED FOR COMMENCEMENT AND PHASE UP
(Place an X if task is completed)*

You have been in Phase 4 for a minimum of 90 days. Date entered phase 4: _____

You have a minimum of 90 consecutive days of sobriety. What is your sobriety date? _____

You are engaged in treatment and attending regularly.
Counselor verification signature: _____

You completed all required classes and courses assigned to you.
Community Supervision Officer verification signature: _____

You have paid all financial obligations in full
Community Supervision Officer verification signature: _____

Are you in compliance with supervision?
Community Supervision officer verification signature: _____

Identify 3 coping responses if triggered:

Identify 3 community resources you can reach out to if need additional support.

Additional Comments/concerns for the team:

Client Signature

Date

Signature to Approve

Date

DWI COURT PROGRAM GRADUATION REQUEST

Graduation from the DWI Court Program is granted as recognition for compliance with the requirements you agreed to when you were accepted into the DWI Court Program.

Please explain to the Court what progress you feel you have made since entering the DWI Court and why you believe you are ready to graduate. (you may add more pages if needed)

Name: _____ Date: _____