



Douglas County Drug Court

Request for Graduation

The request to Graduate form must be completed and turned in by the Last Friday of each month. The DCDC Team will consider your request based on your completion of the last phase/essay.

Name: _____

Date of Entry: _____

Date of Request: _____

You were required to complete the following in Phase IV (20 weeks min): court attendance as directed, meetings with Adult Service Officer-as directed, random pin # urine testing, after-care plan completed with provider, completion of cognitive based group, Sponsor obtained w/continued 12 step work, maintained employment/educational program, 120 days clean/sober and no level III sanctions in last 60 days.

Have you had a positive drug test in Phase IV?	Yes	No
Have you received any sanctions in Phase IV?	Yes	No
Compliance with Substance Abuse Treatment-Phase IV?	Yes	No
Do you have stable housing? How long have you resided at this residence? _____	Yes	No
Do you have a plan for stable income? Job/School/Benefits _____	Yes	No

Type or Write all 3 responses to below questions (attach to this form)

- 1) What goals did you set and accomplish while in Drug Court?
- 2) What aspects of Drug Court helped you the most in obtaining/maintaining your Recovery?
- 3) What advice would you give to a new participant going into Drug Court?