

Weekly Drug Court Report
(This form is required to be with you at court)

Name: Address: Cell #: Facebook account: Email: Employer/shift/wage:	Drug court start date: Total # of weeks in program: Current phase: Next court appearance:
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Phase advancement history

Phase	Started:	Completed:	# wks	Incentives earned:	# sanctions
1					
2					
3					
4					
5					

Notes for eligibility on requesting next phase up packet

Payments - (Receive additional incentives for cumulative fine payments presented before phasing up/commencement)

Original Debt/amount	Date/amount last receipt	Balance	Current (Y / N)
Fine:			
AP&P:			
Treatment:			

Daily call in and UA history

1. Describe/date any late or insufficient samples.	2. Describe and date any missed check in.	3. Describe/date your last illicit and or prescription use.	4. Record number of years/months/week /days of your sobriety.
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Honesty towards your substance abuse is reflected here

1.
2.
3.

4.

Record your 40 hour weekly accumulation of:

1. Work/Job Search	2. Community Service	3. Prosocial meetings
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Include location and the total number of hours

- 1.
- 2.
- 3.

Treatment/Pro Socials/Self Help/AA or NA

Date/Class/Program/Type/Group:	Attendance/Assignments current:	Counselor/Instructor Signature:

Incentives/Sanctions

Record what incentives you will request at your next drug court appearance:	Document any pending violation/assignment here that will be reviewed at drug court:
# of weeks without a sanction:	# of consecutive weeks being 100% compliant:

Results/status of motions I submitted this week and or plan to submit NLT 48 hrs before court:

Date/Time motion submitted to court ____/____/____ @ _____. Brief description/purpose of motion:

I affirm that all of the above questions have been answered truthfully.

Date/Signature of participant
Coordinator

Signature/reviewed with Drug Court