*****This form must be completed in full. It is the responsibility of the participant to get the signature of the required Team Members. In order to be considered for Phase Movement the *original* completed form must be turned in to the DUI Court Office no later than 5:00 p.m. the day *prior* to DUI Court. Forms turned in after 5:00 p.m. on the day prior to Court will be considered at the next court date.*****

CHEROKEE COUNTY DUI/DRUG COURT
PHASE MOVEMENT REQUEST- Phase IV to Phase V

Name _____ Date submitted to Court: _____

I am requesting to be moved from **Phase IV** to **Phase V** at the _____ Court session. I am in school full time or have maintained employment to the best of my ability.

Completed by DUI Court Office Only:

_____ Is substance free and has had consistent negative drug and alcohol screens since _____.
(must have least 90 days negative drug screens to move out of Phase IV)
_____ Been respectful/supportive of peers and polite/cooperative with all DUI Court Team members.
_____ Fees to DUI Court are current. Balance is less than $500 or has made financial arrangements with the DUI Court.
_____ No 0's or 1's on the last month's case management rating form.
_____ Final essay (the effect of the program) **has been delivered to the DUI Court Office.**

Verified on _____ by _____
Date DUI Court Coordinator

Completed by Treatment Team Only:

_____ Attended all support group requirements for Phase IV. Currently has _____ meetings of a required_____.
_____ Been respectful/supportive of peers and polite/cooperative with all Treatment Staff.
_____ Attended all group/individual counseling sessions required for Phase IV.
_____ No 0's or 1's on the last month's treatment rating form.
_____ Completed Step 12 of the MRT book.

Verified on _____ by _____
Date Treatment Coordinator

Completed by Probation Officer Only:

_____ Fees to Probation are current with a balance of less than $165.00 in fees.
_____ All c/s/w required has been completed and **proof has been provided.**

Verified on _____ by _____
Date Probation Officer

In addition to the requirements above, I certify I have **completed the minimum time (21 weeks)** appropriate for this Phase movement. I have maintained the requirements to have any limited driving permit granted to me.

_____ _____
Participant Signature **Date**