

# Cherokee County DUI Court Application for Phase 5

Name: \_\_\_\_\_ Date Turned in: \_\_\_\_\_

Current Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

**MUST meet the following criteria to Phase Up: (place an "X" if task is completed)  
DUE to DUI Court office on Wednesday, prior to Court, by 5pm**

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

You have a minimum of 60 consecutive days of sobriety. What is your sobriety date? \_\_\_\_\_

You have received no jail sanctions or a low-rating within the last 30 days.

You are engaged in treatment and attending regularly?

**Counselor verification signature:** \_\_\_\_\_

Are you in compliance with case management?

(balance less than \$500 or payment arrangement, Fourth essay)

**Case Manager verification signature:** \_\_\_\_\_

Are you in compliance with supervision?

(balance less than \$162, Court fines, CSW completed)?

**Probation verification signature:** \_\_\_\_\_

Engaged in recovery support groups? Home group: \_\_\_\_\_

Engaged in pro-social activities? What: \_\_\_\_\_

Identify 3 of your biggest struggles in Phase 4:

○ \_\_\_\_\_

○ \_\_\_\_\_

○ \_\_\_\_\_

Identify 3 personal goals you would like to accomplish prior to completion:

○ \_\_\_\_\_

○ \_\_\_\_\_

○ \_\_\_\_\_

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Court Coordinator Signature to Approve

\_\_\_\_\_  
Date