



**SPECIALTY COURT
PHASE II PETITION**

_____ District/Circuit Court
Criminal Branch
_____ Division
Specialty Court

Phase II: Treatment Stabilization

In a 5 Stage Model of Recovery (PsyR), Stage 2 is **Awareness**. This is where you will focus on hope and recognize your potential for change.

Name: _____

Program (*circle*): Drug Court Mental Health Court Veterans Court

My last level of care assessment from a clinical treatment provider was (date): _____, 2_____

1. What are your current treatment goals (with clinical treatment provider)? _____

2. Do you have a copy (*circle*)? **YES / NO**

3. What progress have you made towards your treatment goals? _____

4. What are your current Individual Program Plan (IPP) goals? _____

5. What progress have you made on your IPP goals? _____

6. What is your current recovery plan? _____

7. What tools have you learned to help you in your recovery? _____

8. I am aware of my financial obligations (including, but not limited to, restitution, child support/arrearage, court costs, jail fees, etc.) and due dates and have set the current payment plan to meet these obligations: _____

9. I have maintained consistent contact with Specialty Court staff (*circle*)? **YES / NO**

10. I have had consistent attendance for court sessions (*circle*)? **YES / NO**

11. Identify your personal strengths. (Consider strengths to help you meet your goals.) _____

12. What is one positive quote/motto that is encouraging to your recovery? _____

Participant Signature

_____, 2_____
Date

SPC Staff Signature

_____, 2_____
Date