Cobb County DUI Court
State Court of Cobb County

Application for Phase 5 - Original due on Wednesday before Court date, by 5:00 p.m. Submit completed form to Probation/ Court staff only.

Name: _____ **Date Submitted:** _____

You MUST meet the following criteria to Phase Up: *(place an "X" if task is completed)*

☐ You have been in Phase 4 for a minimum of 12 weeks. Date entered phase 4 : _____

☐ You have been jail sanction free for 10 or more weeks and/or have 90 days of documented sobriety.

What is your sobriety date: _____

☐ You are engaged in treatment, have completed MRT step 10 (at least), and are in regular contact with your sponsor?

Group Counselor verification signature: _____

Individual Counselor verification signature: _____

☐ Are you in compliance with supervision (Completed CSW hours, made fine payments etc.)?

Probation verification signature: _____

☐ My Program Fee balance is: _____ and my fine balance is: _____

☐ Identify 3 tools I gained in treatment:

- _____
- _____
- _____

☐ Identify 3 relapse prevention tools I will continue to utilize after the program:

- _____
- _____
- _____

_____ _____

Client Signature *Date* *Judge Signature to Approve* *Date*