



State of Rhode Island Judiciary

Superior Court

Contract

Participant Name	
Case Number	

I do voluntarily agree to enter the Adult Drug Court Program and abide by the following conditions.

1. I will not use or possess alcohol or illegal drugs.
2. I will appear in court as ordered by the judicial officer. Failure to appear can lead to a warrant for my arrest.
3. I will be honest, truthful, and complete all my communications with the court.
4. I will follow the treatment plan as developed by my treatment provider(s), attend all treatment sessions, and follow all rules and regulations of the provider(s).
5. I will obey all laws. I understand that if I engage in any criminal act, I will be prosecuted and may be immediately terminated from the Adult Drug Court Program.
6. I will submit urine samples for testing upon request by the judicial officer, intake supervisors, treatment provider(s), or any other designated agency. I understand that a missed or refused test will be considered a positive test.
7. I understand that if I am not enrolled in school/college full-time, I will be required to seek and maintain employment and/or participate in job or vocational training.
8. If enrolled in school/college, I will attend all my classes each day.
9. If employed, I will provide verification of employment to the judicial officer.
10. I understand that if I fail to follow the terms of this contract and/or any court orders, the judicial officer may impose sanctions upon me which may include but are not limited to:
 - a. Community service work;
 - b. Additional treatment sessions;
 - c. Additional support group meetings;



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- d. Additional drug testing and court sessions;
- e. Curfew or other restrictions;
- f. Home confinement;
- g. Residential placement;
- h. Incarceration at the Adult Correctional Institutions; and/or
- i. Termination from the Adult Drug Court Program.

11. I hereby waive the requirement of the filing of a motion or other pleading and the holding of a hearing prior to the court imposing sanctions upon me. I agree to follow the sanctions imposed upon me.

12. I agree to allow the judicial officer to engage in discussions with Adult Drug Court Program team members and others involved with my program participation, regardless of the presence of an attorney, for the purpose of monitoring my progress with the program conditions.

13. I agree to waive the confidentiality, as described in 42 C.F.R. part 2, of the Adult Drug Court Program proceedings to permit other program participants, authorized visitors, and their families to be present. I also understand that I must not disclose information about other program participants that may become known at the Adult Drug Court Program proceedings as such information is confidential.

14. I agree to waive the confidentiality, as described in 42 C.F.R. part 2, to authorize the Adult Drug Court Program case coordination providers, the direct service provider agents, or any other treatment providers to provide and exchange information with program team members for program purposes.

15. I understand that while in the Adult Drug Court Program, the prosecution of the pending charge(s) and/or violation(s) would be stayed or placed on hold. Additionally, if I successfully complete the program, the pending charge(s) and/or violation(s) will either be dismissed or reduced, in accordance with the sentence that I have previously agreed to.

16. I understand that if I am terminated from the Adult Drug Court Program, I will be sentenced on the pending charge(s) and/or violation(s) against me, in accordance with the minimum and maximum caps that I have agreed to.



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17. I understand that information disclosed by me in the Adult Drug Court Program regarding treatment and the current charge(s) may not be used against me by the prosecutor. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient. However, federal law does not protect information relating to crimes committed on the premises of the program, crimes against program personnel, the abuse or neglect of a child, or a crime involving a substantial risk of death or serious bodily harm.

18. I understand that I will not be required to provide information about other people involved in illegal drug activity as a condition of remaining in the Adult Drug Court Program.

19. I agree to participate in the development of the treatment plan and attend any counseling sessions as required by the judicial officer or treatment provider(s). I will also attend all court hearings. I understand that if I fail to participate as required, the judicial officer may impose sanctions upon me.

20. I have discussed this Contract with my attorney and fully understand the terms and conditions. I freely and voluntarily agree to the terms and conditions herein.

21. Special conditions or agreements:

_____ Signature of the Participant	Date
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_____ Signature of the Attorney for the Participant	Date
	Bar Number

Entered as an Order of the court on:	By Order of:
_____	_____
	Clerk
	Enter:

	Judicial Officer