

**DWI/Drug Court**  
**PARTICIPANT CONTRACT**  
*Collin County Court at Law Number One DWI/Drug Court Program*

**TODAYS DATE:** \_\_\_\_\_

1) I, \_\_\_\_\_, with a DOB: \_\_\_\_\_, CELL NO: \_\_\_\_\_, HOME PHONE: \_\_\_\_\_, and home address of \_\_\_\_\_.

have been found guilty of the offense of (DWI 2<sup>nd</sup>) driving while intoxicated OR \_\_\_\_\_ in Cause No. \_\_\_\_\_.

In lieu of the possible punishment that has or could be imposed in connection with these offenses, I am hereby voluntarily entering into this Contract and agree that I am bound by its terms. \_\_\_\_\_

2) I understand that the validity of this contract is conditioned upon my eligibility for the DWI/Drug Court Program. If at any time after the execution of this agreement and in any phase of the DWI/Drug Court Program, it is discovered that I am, in fact, ineligible to participate in the program, I may be immediately terminated from the program and criminal proceedings will be reinstated. I will not be allowed to withdraw my previously entered plea of guilty unless my ineligibility is based on facts or information which should have been known to the prosecutor prior to DWI/Drug Court admission, or upon Constitutional grounds. \_\_\_\_\_

3) I understand that if I enter this program and fail to complete it, I may be barred from future participation. \_\_\_\_\_

4) I understand that participation in DWI/Drug Court involves a minimum time commitment of twelve months, and may include an aftercare component. \_\_\_\_\_

- 5) I understand that during the entire course of the DWI/Drug Court program, I will be required to attend court sessions, treatment sessions, submit to random drug testing, remain clean and sober, and law-abiding. I agree to abide by the rules and regulations imposed by the DWI/Drug Court Team. I understand that if I do not abide by these rules and regulations, I may be sanctioned or terminated from the program.
- 6) I understand that sanctions may include time in custody, increased treatment episodes, increased testing, bail bond forfeiture, community service and such other sanctions as may be deemed appropriate by the DWI/Drug Court Team utilizing the Collin County Progressive Sanctions Matrix.
- 7) I agree to cooperate in an assessment/evaluation for planning an individualized drug treatment program adequate to my needs. I understand that my treatment plan may be modified by the treatment provider or the DWI/Drug Court Team as circumstances arise, and I agree to comply with any modified requirements.
- 8) I understand that I will be required to pay a program fee of \$400.00, which may be made in installments, which I will still be responsible for should I be discharged unsuccessfully.
- 9) I understand that I will be required to pay for some or all of the cost of my treatment, and I will complete a financial declaration if necessary.
- 10) I understand that I will be tested for the presence of drugs in my system on a random basis according to procedures established by the DWI/Drug Court Team and/or treatment provider. I understand that I will be given a location and time to report for my drug test. I understand that it is my responsibility to report to the assigned location at the time given for the test. I understand that if I am late for a test, or miss a test, it will be considered “dirty” and I may be sanctioned.
- 11) I understand that substituting, altering or trying in any way to change my body fluids for purposes of testing will be grounds for immediate termination from DWI/Drug Court.
- 12) I understand that participating in DWI/Drug Court requires me to be drug and alcohol free at all times. I will not possess drugs (including marijuana) or alcohol, or drug or alcohol paraphernalia. I will not associate with people who use or possess drugs, nor will I be present while drugs or alcohol are being used by others.

**13)** I agree to be drug/alcohol tested at any time by a police officer, probation officer, treatment provider, or at the request of the court or of any agency designated by the court. If I fail to submit to this test, The Court will view this as a positive result and it will result in a jail sanction or possible removal from the program.           

**14)** I understand that I may not possess any weapons while I am in DWI/Drug Court. I will dispose of any and all weapons in my possession, and disclose the presence of any weapons possessed by anyone else in my household. Failure to dispose and/or disclose may result in termination from DWI/Drug Court and possible prosecution for any illegal possession of any weapon.           

**15)** I agree to inform any law enforcement officer who contacts me that I am in the DWI/Drug Court program.           

**16)** I understand that I may not work as a confidential informant with any law enforcement agency while I am in DWI/Drug Court, nor may I be made or encouraged to work as a confidential informant as a condition of my full participation in the DWI/Drug Court program.           

**17)** I may not participate in DWI/Drug Court if I am currently an affiliated gang member.           

**18)** I will inform all treating physicians that I am a recovering addict, and may not take narcotic or addictive medications or drugs. If a treating physician wishes to treat me with narcotic or addictive medications or drugs, I must disclose this to my treatment provider and get specific permission from the DWI/Drug Court Team to take such medication.           

**19)** I agree to be responsible for what goes into my body that may affect drug test results. Before taking medication of any kind, I will check with the pharmacist to ensure that it is non-narcotic, non-addictive and contains no alcohol. I will pre-register any and all medications, prescribed or over-the-counter, with my treatment provider and with the DWI/Drug Court.           

**20)** I agree that I will not leave any treatment program without prior approval of my treatment provider and the DWI/Drug Court Team.           

**21)** I understand that I may dispute positive test results, but that re-testing will be at my expense, and that I may face more severe sanctions for a re-test that is still positive.

- 22)** For the purposes of regular DWI/Drug Court review hearings, I agree to waive my right to have my attorney of record present. I understand that my case may be discussed without my attorney or the prosecutor present.
- 23)** I understand that my individual course of treatment may include residential treatment, education, and/or self-improvement courses such as anger management, parenting or relationship counseling.
- 24)** I understand that during the early phases of treatment and recovery, I may be precluded from working or from gaining employment. I further understand that within the time directed by the DWI/Drug Court Team, I will seek employment, job training and/or further education as approved by the DWI/Drug Court Team, and that failure to do so may result in sanctions or termination.
- 25)** I agree to keep the DWI/Drug Court Team, treatment provider and law enforcement liaison, if any, advised of my current address and phone number at all times and whenever changed. My place of residence is subject to DWI/Drug Court approval, and I will not leave Collin County without prior approval from the DWI/Drug Court Team.
- 26)** I agree to keep the DWI/Drug Court Team and my probation officer advised of any new arrest or any contact with law enforcement immediately upon being released from jail or an officer at any time.
- 27)** As a condition of participation in this program, I agree to the search of my person, property, place of residence, vehicle or personal effects at any time with or without a warrant, and with or without reasonable cause, when required by a probation officer or other law enforcement officer.
- 28)** I agree to execute the Consent for Disclosure of Confidential Substance Abuse Information. I understand that any information obtained from this release will be kept apart from the Court file.
- 29)** I understand that my failure to successfully complete and graduate from the DWI/Drug Court program will result in re-instatement of criminal proceedings against me. I understand that my failure to complete DWI/Drug Court cannot be a basis for withdrawing my previously entered guilty plea.

30) I understand that if I should test positive for drugs and/or alcohol I will start the program over every time. I further understand that should I test positive for drugs and/or alcohol after my six month mark in program and have had the DLD and SCRAM units removed I will be required to have it reinstalled for a period of 6 months while starting the program over.                     

31) I understand that if I am called in for a random UA I have 24 hrs. to submit and if I fail to do so or forget, it will be considered the same as failing the test or testing positive and may result in jail sanctions.

**32) I understand that the Probation Dept. and Court work together as a team. I will not blame my failure to report, submit to a UA or any other requirement as requested on communication with the Court or Probation. I will also request a travel permit through my probation officer and from the Judge as well. I WILL NOT leave messages for Court staff advising them I will not be reporting to DWI/Drug Court due to scheduling conflicts, if so, I understand that there may be a 3 day jail sanction.**                     

I have read, understand and have had the opportunity to ask any questions in regards to the above contract and the Collin County Court at Law Number One DWI/Drug Court Program Participant's Handbook, and I understand what I have read. I am willing to enter into this agreement with the County Court at Law Number One Program.

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Applicant/Participant Signature Approved as to Form and Substance	Date
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Attorney for Applicant/Participant Approved as to Form	Date
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DWI/Drug Court Judge	Date

