

IN THE MUNICIPAL COURT OF KANSAS CITY, MISSOURI

CITY OF KANSAS CITY, MISSOURI)
)
)
)
Plaintiff,)
)
v.)
)

)
)
Defendant.)

Case No. _____

DRUG COURT CONTRACT

You are voluntarily entering the Drug Court Program. Read the terms of this contract carefully and initial each term of the contract, date and sign the contract.

- 1. _____ I understand that the validity of this contract is conditioned upon my eligibility for the Drug Court Program. If at any time after the execution of this agreement and in any phase of the 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.
- 2. _____ I agree to sign reasonable authorizations for the release of information required by the Drug Court Team. It is understood that any additional information regarding my treatment and progress in treatment identifying me will not be released to persons not working for the Drug Court Team and/or treatment providers without further authorization.
- 3. _____ I understand that I am being sentenced to 180 days at the Municipal Correctional Institution (MCI).
- 4. _____ I understand that I will be screened for treatment on the Wednesday after I sign this contract. If I am deemed inappropriate for inpatient treatment, I will be brought back to Judge Locascio to determine the appropriate action. If I am deemed appropriate for treatment I will be sent to a minimum of twenty-one (21) days inpatient treatment as soon as a bed becomes available to me.
- 5. _____ I understand that if I leave the inpatient treatment without staff authorization, I will be issued a general ordinance summons (GOS) for escaping custody. This new charge could carry an additional 180 day sentence at MCI.
- 6. _____ I understand that during the inpatient phase of treatment I will be precluded from working.
- 7. _____ Once I complete inpatient treatment, I will be brought back to court and the remainder of my sentence will be suspended. I will then be placed on two (2) years probation with a minimum of six (6) months of supervision by the Drug Court Coordinator and will be required to complete out-patient treatment as directed by the treatment provider.
- 8. _____ I will attend a minimum of one (1) outside group meeting per week and submit proof of attendance as required.
- 9. _____ I agree to keep all appointments required by the treatment provider. I understand that if I miss any program appointments, the Drug Court Team may impose sanctions.
- 10. _____ I understand that Drug Court is on Thursdays at 1:30 p.m. in Courtroom G. The frequency of court appearances will depend upon progress in the treatment.
- 11. _____ Should I fail to appear for any drug court hearings as required, a bench warrant may be issued for my arrest; sanctions may be issued including termination from the program.
- 12. _____ I will immediately inform the Drug Court Coordinator of any change of address, telephone number and employment status.
- 13. _____ I will not violate the law. However, if I do violate the law, I will report it immediately and I

understand such violations may subject me to sanctions, including termination from the drug court program.

- 14. _____ I will not use alcohol in any form.
- 15. _____ I will not use any drugs, legal or illegal. I will submit any prescription for drugs to my counselor for verification and approval. I will not use over-the-counter, non-prescription medications without permission of my counselor, as some over-the-counter medications will produce a positive reading on drug screens.
- 16. _____ I agree to give random breath, blood, urine, hair or sweat samples for drug testing as requested.
- 17. _____ I understand that substituting, altering, or trying in any way to change my body fluids for purposes of testing will be grounds for sanctions.
- 18. _____ I understand that I may not work as a confidential informant with any law enforcement agency while I am a Drug Court participant, nor may I be made or encouraged to work as a confidential informant as a condition of my full participation in the Drug Court Program.
- 19. _____ I will seek employment, job training and/or further education as requested by the Drug Court Team.
- 20. _____ I will seek stable, safe housing as requested by the Drug Court Team.
- 21. _____ I understand the court will impose sanctions for program violations that include, but are not limited to: additional outside meetings, community service, repeating a treatment level, issuance of bench warrants, jail time, termination from the program requiring me to serve my sentence, and other sanctions as may be deemed appropriate by the Drug Court Team.
- 22. _____ I acknowledge there is no right to appeal to any other court of judicial determination for any Order issued by the Drug Court, including termination from the program.
- 23. _____ I will follow all other program rules of which I am informed by the treatment providers or the Drug Court Team.

I acknowledge that I understand the terms and conditions of this contract and have received a copy of the same.

Defendant **Date**

Attorney for Defendant **Date**

City Prosecutor **Date**

Judge **Date**