Transfer Form for Non-Enrolled (Dismissed) Participants

THIS DOCUMENT IS TO BE USED FOR PARTICIPANTS WHO HAVE BEEN DISMISSED AND WANT TO ENROLL AT A NEW DUI PROGRAM, AND ARE REQUESTING THAT THEIR CREDITS BE TRANSFERRED. THE RECEIVING PROGRAM SHOULD NOTIFY THE COURT OF THE PARTICIPANT'S ENROLLMENT, BUT IS NOT REQUIRED TO NOTIFY THE SENDING PROGRAM OF THE PARTICIPANT'S ENROLLMENT OR FAILURE TO ENROLL.

PARTICIPANT INFORMATION

Name			
NameFirst	Middle	L	ast
Address			
Street	City	State	Zip
Telephone ()	()	Work	
Date of Birth	Driver's License #		
2 **** 0.1 2.1 ***		,	
COURT INFORMATION			
Court of Conviction			
Address			
Docket / Case # Conviction Date Attach copy of current court reinstate order to new program, if applicable			
Attach copy of current court remstate	order to new program, if appr	iicabie	
PROGRAM INFORMATION			
Sending Program:		g Program:	
Name:	Name:		<u></u>
License #:	License #:		
Address:			
Phone #:			
PROGRAM REQUIREMENTS COMPLETED			
Hours of Education			
Hours of Group Counseling Hours of Re-entry Activities			
Alcohol / Drug Assessment (Results)			
Additional Program Requirements (if applicable)			
ENROLLMENT INFORMATION			
Program Type: Wet Reckless			
First O	ffender (\square 3-mon	\square th \square 6-month \square 9	9-month)
	le Offender (□ 12-mo	onth 🗆 18-month	□ 30-month)
Enrolled: Dismissed:			
Total Participation Time (Excluding time on LOA):			
Additional Information:			

Date

Signature & Title of Program Representative