

How do you know this person? _____

How long have you known this person? _____

How do they support you in your recovery? _____

Name: _____ **Phone No.:** _____

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- **What have you learned in substance abuse and/or mental health treatment and Veterans Treatment Court to support your recovery since you joined?**

- **What challenges do you think might occur following graduation from the Veterans Treatment Court? What do you need from (Veterans Treatment Court and/or others) in order to meet those challenges and be successful beyond graduation?**

- **What do you consider to be the benefits of recovery?**

- **Why do you believe you are ready to graduate?**

Veteran Signature: _____ **Date:** _____