

Adult Drug Court

PROVIDING ALTERNATIVES TO INCARCERATION

555 South 9th St., Lincoln, NE 68508

Landon Parks, Drug Court Coordinator

New Sponsor Request Form

Provide the following information about your sponsor:

Name: _____ Phone #: _____ Years of Sobriety: _____

AA or NA affiliated? _____ How many meetings a week do they attend? _____

Does your sponsor have a sponsor? _____ How many people do they sponsor? _____

Are they involved in service work? YES NO If yes, list the type of service work they do:

Are they actively involved in 12-step functions? YES NO If yes, list the types of functions they attend: _____

Provide the following information about your relationship with your sponsor:

Where/how did you meet your sponsor? _____ How long have they been your sponsor? _____

How often are you required to contact them? _____ Do you attend meetings together? YES NO If yes, how often? _____

Do you attend 12-step functions together? YES NO If yes, list the functions you have attended together: _____

Have you started to do 12-step work with your sponsor? YES NO If yes, please describe how you and your sponsor have set up doing your work (example: you meet once a week to go over the step you are working on): _____

What step are you currently working on? _____ If none, please explain why you are not doing your 12-step work: _____

What is your plan of action related to your 12-step work? _____

Have you spoken with your sponsor about your plan of action? YES NO If no, explain why you have not done so: _____

Signature of Drug Court Participant

Drug Court Participant Printed Name

Date

For office use only: _____ Sponsor was verified. _____ Approved _____ Denied

Supervision Officer's Signature

Date

Lancaster County Department of Community Corrections
Kim Etherton, M.A., Director