

# KENT COUNTY VETERANS TREATMENT COURT

62A District Court, 2650 DeHoop Ave SW, Wyoming, MI 49509-1893



*Nullo Relinquam Post Veteran—“Leave No Veteran Behind”*

## Participation and Waiver Agreement

Name:

Case Number(s):

KCVTC Case File:

DOB:

Charge(s):

Judge: Pablo Cortes (P53757)

Kent Co. Prosecutor: Gerard E. Faber Jr. (P67547)

Defense Attorney:

Probation Officer: Lisa Bykerk -- Samantha Rose

**I understand that when I enter a guilty plea to the above-stated charge(s), I will be sentenced to the Kent County Veterans Treatment Court (KCVTC). I understand that there will be additional conditions to my sentence. As a condition of my sentence to the Kent County Veterans Treatment Court (KCVTC), I agree to the following terms and conditions set forth in this agreement:**

### I agree to:

1. Complete any evaluations or assessments as directed by the KCVTC and follow the recommendations thereof. The treatment recommendations will be shared with the KCVTC team.
2. Work with KCVTC staff to develop a treatment plan and follow the plan accordingly, including aftercare and continuing care recommendations.
3. Meet with a member of a veteran service organization or a county veteran counselor, as directed by KCVTC to discuss available veterans benefit programs and/or resources for which I may qualify
4. Not use and/or possess, any firearm/ammunition unless in conjunction with military service, consume alcohol and/or other illegal or controlled substances, nor be in the presence of any person using, possessing, or consuming said substances; nor enter premises where alcohol is the primary source of revenue. I understand if I am found to be under the influence of drugs, alcohol, or medication not prescribed to me that I may be sanctioned and/or terminated from the program.
5. Submit to PBT's, electronic alcohol monitoring, and/or drug and alcohol screenings as directed.
6. Be employed or enrolled in an educational program or participate in another positive activity as directed.
7. Notify KCVTC of any changes in phone number, address, email, within 24 hours.

8. I understand that as a condition of participation with the KCVTC, I agree to the search of my person, property, place of residence, electronic device, vehicle or personal effects at any time with or without a warrant, and with or without reasonable cause, when required by the KCVTC probation officer, program director or other law enforcement officer when accompanying KCVTC staff
9. I understand that I must reside in Kent County at the time/day of my plea and sentencing, in order to be admitted into KCVTC.
10. I understand that if I relocate out of Kent County after my plea and sentence without informing this court, I may be involuntarily discharged and returned to the original court of jurisdiction
11. I understand that I must maintain Kent County residency while a KCVTC participant. If I relocate outside of Kent County after being admitted into KCVTC, I must provide proof of transportation and financial ability to sustain all probationary requirements of KCVTC. However, I will be deemed ineligible for any fiscal support or non-VA ancillary/peripheral therapeutic expense coverage, while in program/probation.
12. Notify KCVTC of **ANY** law enforcement contact, CPS contact, arrest or criminal charge within 24 hours of event and/or of release from jail.
13. Make full and truthful reports to the KCVTC as directed by any team member.
14. Not engage in any antisocial, assaultive, threatening, or aggressive behavior (including social media)
15. Not leave the state or without the prior consent of KCVTC. I understand to notify KCVTC of **ANY** travel.
16. Maintain the confidentiality of other KCVTC participants.
17. Pay all court ordered fines and costs, including minimum state costs, the KCVTC supervision/program fee, crime victims' rights assessments, and restitution resulting from my conviction, in order to successfully complete the program. I will also pay all, or make substantial contributions toward payment of, the costs of the treatment and the KCVTC program services provided to me, including, but not limited to, the costs of urinalysis and such testing or any counseling provided. However, if the court determines that the payment of fines, the fee, or costs of treatment would be a substantial hardship for me or would interfere with my treatment, the court may waive all or part of those fines, the fee, or costs of treatment
18. Appear in court on all scheduled court dates and to attend all appointments with my probation officer, KCVTC program director, mentor, and/or treatment provider.
19. Comply with KCVTC's policies, conditions and probationary requirements, discussed within the KCVTC Participant Handbook.

**I waive the following rights:**

1. The right to a speedy trial.
2. The right to representation by an attorney at the review hearings. I still maintain the right to an attorney for any program violation and/or probation violation where the facts are contested and a liberty interest is at stake, or if I may be terminated from the KCVTC program.
3. With the agreement of the Kent County prosecutor, the right to a preliminary hearing.
4. To be present at the KCVTC team staffing meetings.

**I understand that:**

1. The KCVTC program has a duration of 12 to 24 months. My participation may be extended beyond this duration based on probationary and/or program compliance, as well as any judicial finding
2. If I am convicted of a felony for an offense that occurred after I am admitted to KCVTC, the judge must terminate my participation in the program per MCL 600.1208.
3. I understand I am required to attend all appointments for court, treatment, ancillary services, and all drug and alcohol testing as scheduled.
4. I understand that KCVTC staff may make unscheduled home visits, and I will allow KCVTC staff and/or team members, together with law enforcement officials if accompanied or not, into my home at any time for supervision or compliance reasons.
5. Review hearings are held in open and public courtrooms, and although the court attempts to minimize confidential information in court, it is possible that an observer could connect a participant's identity with the fact that he or she is in treatment as a condition of participation in the KCVTC or that confidential information may be revealed.

6. Staffing meetings, which are held before review hearings, are typically closed to the public. Confidential information may be discussed by the KCVTC team members at a staffing meeting. I understand that if a non-team member is invited to participate in a staffing meeting, they must sign a confidentiality agreement and receive my consent prior to observation. I understand that participants will not be present at staffing meetings.

7. The data in my public and confidential file may be used for research, data analysis and program evaluation by the KCVTC court staff, or individuals or others independent of the KCVTC. Any data used in this way will be de-identified prior to distribution.

8. Failure to fully comply with all the terms and conditions of the program listed above may result in the following:

- A. Notification to the judge that I am in violation of the program.
- B. If I admit guilt to or am found guilty of a program violation; then sanctions, up to and including jail, may be imposed and/or additional conditions may be added as determined by the judge with input from the KCVTC team.
- C. Termination from the program.

9. I understand that the KCVTC may amend these conditions and/or add new conditions, notice of which will be provided to me in writing. I understand that I must comply with the amended or added conditions.

10. I understand that KCVTC adheres to substance abuse testing protocols and policies of both The Michigan Association of Treatment Court Professionals (MATCP) drug testing manual (2nd edition) and The State of Michigan Veterans Treatment Court Statute, MCL 600.1207(c)

11. I understand that KCVTC adheres to The Michigan State Court Administrative Office (SCAO) Veterans Treatment Court Manual on Standards (December 2019) Chapter 4, Scientifically Valid Drug Testing Methods.

**The KCVTC Program Director and/or Probation Officer agrees to:**

1. Meet with the program participant as needed to help assure successful completion in the program.
2. Report the participant's progress and test results to the court.
3. Refer the participant to any community agency at the KCVTC's disposal which may assist in the participant's recovery.

I have discussed the above listed conditions with my attorney and the KCVTC program director and/or probation officer, as well as received a copy of this form and a copy of the Kent County Veterans Treatment Court (KCVTC) Participant Handbook. By signing this Agreement, I am indicating that I fully understand all the terms and conditions detailed in this Agreement and agree to abide by each of the conditions

\_\_\_\_\_  
Participant Signature \_\_\_\_\_  
Date

I have discussed the above listed conditions with the participant and have provided a copy of this agreement and the KCVTC Participant Handbook to the veteran participant.

\_\_\_\_\_  
Program Director or Probation Officer Signature \_\_\_\_\_  
Date

**Defense Attorney:** \_\_\_\_\_ \_\_\_\_\_  
Date

**Kent County Prosecutor:** \_\_\_\_\_ \_\_\_\_\_  
Date

**KCVTC Judge:** \_\_\_\_\_ \_\_\_\_\_  
Date