

Active Recovery

Change Your Thinking, Change Your LIFE...

www.ActiveRecoveryLA.org

Date: _____
Client: _____
DOB: _____
SSN: _____
Insurance: _____
Email: _____
Phone #: _____

Location Preference:

- ☐ Shreveport **318-946-8157**
3821 Southern Ave. 71106
- ☐ Bossier **318-584-7133**
1505 Doctors Dr. 71111
- ☐ Minden **318-377-1072**
421 Meadowview Dr. 71055

Reason for referral (Please include current charges if any, relevant history, drug and alcohol history, and which program you suggest they enroll) this information is vital to determine which program/length of stay:

☐ Substance Abuse Assessment ONLY: Follow all Clinical Recommendations ☐ Yes ☐ Not at this time

☐ IOP **Substance Abuse** 3 days per week MWF all locations

☐ IOP w/**Sober Parenting** focus: add 1 day/week for 8 weeks, Add *Thursdays*

☐ IOP w/**Anger Management** focus: add 1 day/week for 8 weeks Add *Tuesdays*

☐ **Batterer's Intervention Program (BIP)** for men/women (separate locations): *Tuesdays at 5 pm, 26 weeks, \$25/session if no Substance Use Disorder. **Must be Domestic Violence perpetrator.** Medicaid will pay **if** they have a Substance Use Disorder.*

☐ Defensive Driving Course: Course is online only, offered through DriveSafeLA.org - \$65

☐ First Time Offender DWI/DUI Course - \$65 *1st OR third Thursday in Bossier, one hour*

☐ Random Testing **Only** Program: (Indicate frequency: ☐ 1 per month ☐ 2 per month ☐ 4 per month)

Phase 2= TWICE weekly for SIX weeks

Phase 3= once weekly for FOUR weeks.

Active Recovery is an Abstinence Based program, NO DRUGS OR ALCOHOL for the entire program.

ALL IOP groups are 3 hours long, including Anger & Addiction and Sober Parenting groups.

Referring Agency Information:

Name & Agency: _____

Contact Phone number: _____

Email: _____

Please fax or email form to:

Shreveport **Fax: 318-216-5868**
Shreveport@ActiveRecoveryLA.org

Bossier **Fax: 318-584-7135**
Bossier@ActiveRecoveryLA.org

Minden **Fax: 318-377-9283**
Minden@ActiveRecoveryLA.org