

Michigan Diversion Center

Program Agreement Form

I _____, understand that by participating in the Michigan Diversion Center program, I am committing to the following terms and conditions:

1. Attendance: I will attend all program sessions as required and will arrive on time. If I am unable to attend a session, I will notify Michigan Diversion Center as soon as possible. I also understand there maybe additional cost to make up missed sessions.
2. Participation: I will actively participate in all program activities, including group sessions, individual sessions, and any other activities required by the program.
3. Cooperation: I will cooperate with all staff members and follow their instructions. I understand that failure to comply with program rules and staff instructions may result in termination from the program.
4. Confidentiality: I will maintain the confidentiality of all program participants and staff members. I will not discuss other participants' personal information or issues outside of program sessions.
5. Substance Use: I will refrain from using drugs or alcohol during program hours and while on program premises. I understand that if I am found to be under the influence of drugs or alcohol, I will be asked to leave the program.
6. Accountability: I will take responsibility for my actions and behavior, and I will not blame others for my mistakes or problems. I understand that I am responsible for my own progress and success in the program.
7. Compliance: I will comply with all court orders and probation requirements related to my participation in the program.
8. Progress Monitoring: I understand that my progress will be monitored throughout the program, and I will provide accurate and honest information about my progress and any challenges I am facing.
9. Completion: I will remain in the program until I have successfully completed all program requirements, as determined by Michigan Diversion Center Staff.
10. Termination: I understand that failure to comply with program rules and expectations may result in termination from the program. I also understand that termination from the program may result in additional legal consequences.

I have read and understand the terms and conditions of the [Agency Name] program agreement. I agree to comply with all program rules and expectations.

Client Signature: _____ Date: _____

Printed Name: _____

Program Staff Signature: _____ Date: _____