

Attachment B to Hancock County, Ohio, Criminal Rules

DATE

Hancock County Court of Common Pleas
JUDGE
300 South Main Street
Findlay, OH 45840

Re: Motion for Intervention in Lieu of Conviction
DEFENDANT, CASE NUMBER
SSN:
DOB:

Dear JUDGE,

Please be advised that I am a [give appropriate licensing or credentialing information as authorized and listed in Ohio Revised Code section 2951.041(B)(5), e.g. Licensed Independent Chemical Dependency Counselor] licensed by the State of Ohio, and I am presently employed in that capacity at AGENCY/ADDRESS.

In the course of my duties at AGENCY, I have evaluated and will be treating OFFENDER'S NAME for substance dependency and abuse in an individual counseling program. His/Her diagnosis per DSM-IV criteria is [appropriate diagnosis, e.g., Alcohol Dependency 309.90, Marijuana Abuse 305.20, and/or Cocaine Abuse 305.20]. [Include appropriate intervention plan, e.g. This program involves individual therapy and it is expected that the offender will continue his/her treatment in this program until I believe maximum treatment benefit has been obtained. In addition to the counseling that I will be providing OFFENDER'S NAME, he/she will also be ordered to attend 2-3 AA/NA meetings per week, turning in signed slips as proof of attendance.]

It is my professional opinion that OFFENDER'S NAME drug/substance usage was a factor leading to the criminal charge (i.e. Possession of Drugs) before the Court; that at the time of the offense he/she was drug/chemically dependent or in danger of becoming drug/chemically dependent; and that the intervention in which he/she is currently participating [or scheduled to commence] through AGENCY will substantially reduce the likelihood of any further criminal activities on his/her part.

If you need further information with respect to OFFENDER'S NAME course of treatment and his/her participation in the program, please contact me. Monthly progress reports will be provided on a regular basis.

Sincerely,

THERAPIST/CREDENTIALS
AGENCY