

MONITOR'S REPORT

Report covers month of: _____

Name of Participant: _____

Number of informal contacts (telephone, etc.) with the participant during this period? _____

Number of formal contacts with the participant during this period? _____

Has the participant attended his/her required number of 12 Step Meetings during the month?

Yes No (If not, please explain on reverse)

Has the participant attended his/her required number of Attorney Support Meetings during the month?

Yes No (If not, please explain on reverse)

Is the participant's attitude cooperative?

Yes No (If not, please explain on reverse)

Monitor's Initials

Please comment on any instances of non-compliance noted on the previous page, on the participant's overall participation in his/her recovery program (12 Step, family, professional issues), and provide any recommendations you may have as to how FLA can assist you or the participant in any way. Thank you.

Monitor

Date

Revised 2/28/95

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