

**IN THE COURT OF COMMON PLEAS
COUNTY OF WARREN, STATE OF OHIO
CRIMINAL DIVISION**

STATE OF OHIO,	:	CASE NO:
Plaintiff,	:	WARREN COUNTY COMMON PLEAS VETERANS HONOR COURT
v.	:	
,	:	PARTICIPATION AGREEMENT AND WAIVER OF RIGHTS
Defendant.	:	

I. PARTICIPATION IN THE PROGRAM

- 1.01 I request to participate in the Warren County Common Pleas Veterans Honor Court ("WCVHC"), as part of a community control ("Probation") sentence or Intervention in Lieu of Conviction plan.
- 1.02 I understand that I will not be denied admission to WCVHC based on my race, color, religion, gender, sexual orientation, national origin, ancestry, age, citizenship, marital status, veteran's status, financial ability, or disability.
- 1.03 I have had the opportunity to consult with my attorney regarding my acceptance into WCVHC, and I have read and reviewed this Agreement and the WCVHC Participation Handbook ("Handbook").
- 1.04 I understand that this Agreement and the Handbook set forth the requirements of WCVHC with which I must comply.
- 1.05 I understand that I am being admitted into WCVHC as:
- ☐ A condition of my community control (probation) sentence.
 - ☐ A condition of my intervention in lieu of conviction ("ILC") plan.
 - ☐ A condition of my judicial release.
- 1.06 I understand that my case is now being transferred to the WCVHC docket pursuant to Local Rule 9.02. I understand this means that all further court proceedings will be heard by the WCVHC Judge until I complete or am terminated from the WCVHC program.

- 1.07 I understand that if I follow the WCVHC rules outlined in this Agreement and the Handbook, I may receive incentives for my conduct as outlined in the Handbook. I understand that if I am in jeopardy of receiving a jail sanction, I will be provided with notice, a hearing, and the right to be represented by an attorney. I understand that I may knowingly, intelligently, and voluntarily waive my right to this hearing after being advised of my right and/or speaking to an attorney.
- 1.08 I understand that if I fail to follow the WCVHC rules outlined in this Agreement and the Handbook, I may receive sanctions for my conduct as outlined in the Handbook.
- 1.09 I understand that I may be unsuccessfully terminated from the WCVHC program if I do not comply with the WCVHC rules that are contained in this Agreement and the Handbook. I understand that if I am in jeopardy of unsuccessful termination I will be provided with notice, a hearing, and the right to be represented by an attorney. I understand that I may knowingly, intelligently, and voluntarily waive my right to this hearing after being advised of my rights and/or speaking to an attorney.
- 1.10 I understand that, by entering WCVHC, I am waiving some of my constitutionally guaranteed rights to which I may otherwise be entitled. Those rights include:
- a. My right to be represented by an attorney at all status review hearings before the WCVHC Judge, though I maintain the right to request the attendance of my attorney during the portion of any Treatment Team meeting that concerns me.
 - b. My right to object to *ex parte* communications with the WCVHC Judge regarding my treatment, progress, and rule infractions without my presence or the presence of my attorney.
 - c. My right to have my person, residence, or personal property searched without probable cause and/or a warrant by WCVHC staff.
 - d. My right to remain silent and to not incriminate myself regarding violations of the rules of the WCVHC program. However, the waiver does not apply to my rights in regard to pending criminal charges and statements I make cannot be used as evidence in any criminal prosecution.
- 1.11 I understand that I have the right to request a defense attorney be present during my portion of a WCVHC Treatment Team meeting as explained in the Handbook.
- 1.12 For all WCVHC related events, including treatment meetings, court-sponsored events, and court appearances, I agree to comply with the following dress code:

No shorts
No miniskirts

No spaghetti straps, tank tops, halter tops, or strapless tops or dresses
No tops or dresses exposing any portion of the breast
No skintight pants or skirts
No see-through clothing
No baggy pants
No pajama pants
No sexually suggestive clothing
No clothing referring to illegal drugs, alcohol use, or weapons
Hats must be removed for all indoor activities
Pants must be pulled up to the waist

I agree to appear at all status review hearings in clean clothing and be neatly groomed. I understand any noncompliance with this dress code may result in my being asked to leave and faced with a possible sanction.

II. COURT APPEARANCES

- 2.01 I understand I will be in the WCVHC program for a minimum of 17 months, and that my time in the program may be extended if I fail to comply with all the requirements. I understand my time in the WCVHC program may be extended if I fail to maintain my sobriety, obtain new criminal charges, fail to comply with the rules of WCVHC, or fail to comply with court orders. If I am determined to be low risk, I will be entered into the WCVHC low risk docket and will complete a minimum program length of 12 months (4 phases instead of 5) for successful completion.
- 2.02 I understand there are five phases (four phases for low risk docket) of WCVHC and I must complete all phases in order to complete the program.
- Phase 1 – Basic Training (60 days minimum)
 - Phase 2 – Technical Training/AIT (90 days minimum)
 - Phase 3 – Active Duty Station (120 days minimum)
 - Phase 4 – Excelling at Mission (120 days minimum)
 - Phase 5 – Continuum of Operation (120 days minimum)
- 2.03 I agree to attend all scheduled court appearances in WCVHC, including regular status review hearings at least twice a month in the first phases and regularly thereafter. I understand that the frequency of these court appearances is determined by the WCVHC Team.
- 2.04 I agree to openly communicate with the WCVHC Team, including the WCVHC Judge, about my life, treatment, mental health, and participation in the WCVHC program.
- 2.05 I understand that lying or misleading any member of the WCVHC Team may result in harsh sanctions including being unsuccessfully terminated from WCVHC.

- 2.06 I agree to be attentive and respectful to my peers and the WCVHC Team during any court appearances. I understand this means never using violence, threats, intimidation, or improper language.
- 2.07 I understand that WCVHC is divided into different phases as outlined in the Handbook, and that my requirements for WCVHC will change depending on my advancement through those phases.
- 2.08 I agree to carry a calendar with me. I agree to write the dates for all scheduled treatment sessions, probation appointments, drug screen, and work/school/GED class scheduled in my calendar. I agree to make this calendar available for inspection to any member of the WCVHC Team at any time.
- 2.09 I understand that I am solely responsible for attending my WCVHC related appointments on time. I understand that I may be sanctioned for failing to attend a WCVHC related appointment or failing to reschedule a WCVHC related appointment in a timely manner.
- 2.10 I agree to keep confidential all the information I receive from others during my court appearances, including in status review hearings.

III. SUBSTANCE USE

- 3.01 I agree to abstain from the use or possession of any illegal drugs, alcohol, marijuana (including medical marijuana) or synthetic cannabinoids (including but not limited to Spice and K2) while in WCVHC.
- 3.02 I agree to voluntarily report to the WCVHC Team any violations of this Agreement and the Handbook including my use of illegal drugs or alcohol.
- 3.03 I agree that if I am prescribed any medication by a physician or medical professional, I will contact my probation officer within 24 hours to report my possession of the medication.
- 3.04 I agree to inform the WCVHC Team of any and all over-the-counter medications that I use within 24 hours of such use.
- 3.05 I understand that it is my responsibility to confer with a pharmacist or medical professional to ensure that any medication I want to take, whether prescribed or over-the-counter, is not mood altering or addictive, and that it does not contain alcohol. I understand that the use of any such medication, whether it is prescribed or not, could result in my termination from WCVHC.
- 3.06 I agree to inform any pharmacist or medical professional from whom I seek treatment or medication about my participation in WCVHC.
- 3.07 I agree to notify my probation officer of any prescription or over-the-counter medication that I plan to take *before* taking the substance.

- 3.08 I agree not to enter any establishment with a primary function of selling alcohol or gambling. I understand that casinos, grocery store liquor sections, bars, and packaged liquor stores are off limits to me and, if I am found to be in one of these places, I will be sanctioned.

IV. DRUG AND ALCOHOL TESTING

- 4.01 I agree to submit to random, frequent, and observed drug and alcohol screens if requested by any member of the WCVHC Team. I understand that, even if I am not diagnosed with a substance use disorder and do not have a history of substance use, I must still undergo random and observed drug testing.
- 4.02 I agree to call the OCSS Substance Test Check in System at 937-870-3422 daily between 6:00 am and 2:00 pm to find out if I am required to submit to a drug screen.
- 4.03 I agree that if I am selected to submit to a drug screen, I shall report to the Warren County Court Services Department at 520 Justice Drive, Lebanon, Ohio 45036 that same day between the hours of 8:00 am and 3:30 pm.
- 4.04 I understand that failing to call the voicemail line or failing to remember the testing hours will not be an excuse for missing my drug screen.
- 4.05 I understand that failing to attend a drug screen, adulterating a drug screen, diluting a drug screen, submitting the sample of another person, or failing to provide a sufficient sample will be considered a positive drug screen and shall result in a sanction.
- 4.06 I understand that if I deny any use when confronted with a positive urine screen, the specimen shall be sent to a certified outside laboratory for testing, and I will be subject to a probation violation hearing or an ILC revocation hearing if the laboratory results are positive (without a valid, approved prescription).
- 4.07 I understand and agree to comply with the terms and conditions of drug and alcohol testing set forth in this Agreement and the Handbook.

V. TREATMENT AND OUTSIDE SUPPORT MEETINGS

- 5.01 I agree to participate in and complete any and all treatment recommendations placed upon me by my assigned WCVHC Treatment provider, including outpatient and/or residential substance abuse treatment and counseling, mental health treatment and counseling, and aftercare treatment.
- 5.02 I agree to be assessed for and placed in treatment as soon as possible upon my start in WCVHC.
- 5.03 I agree to sign an authorization for release of information form to provide for communication of confidential information, participation/progress in treatment, and compliance with the

provisions of relevant law, including the “Health Insurance Portability and Accountability Act of 1996.” 42 U.S.C. 300gg-42, as amended and sections 2151.421 and 2152.99 of the Revised Code.

- 5.04 If deemed appropriate and necessary for my care, I understand that I may be required to attend residential treatment. This treatment will be coordinated through the Cincinnati or Dayton Veterans Affairs Medical Center. If I am not eligible for services through either the Cincinnati or Dayton VA Medical Center, the WCVHC Treatment Team will consider other appropriate residential treatment facilities that meet my needs.
- 5.05 I agree to attend all treatment sessions for substance abuse and/or mental health that are requested of me by the WCVHC Program. I understand these sessions may include individual, family, and group counseling.
- 5.06 I agree to arrive on time for all my treatment sessions and will not leave until the session is over. If I am late, I understand I will not be allowed to attend the session and may be considered absent, which could result in my being sanctioned by the WCVHC Judge.
- 5.07 I understand that failure to attend a treatment session may result in me being sanctioned as explained in the Handbook.
- 5.08 I agree to keep confidential all the information I receive from others during my time in treatment.
- 5.09 I agree to be attentive and respectful to my peers and treatment providers during any treatment sessions. I understand this means never using violence, threats, intimidation, or improper language in treatment sessions.
- 5.10 I understand that I may be responsible for the costs of my treatment not otherwise supplied by government sources unless I am found by the WCVHC Judge to be indigent.
- 5.11 I agree to attend outside support group meetings each week and be responsible for timely turning in proof of my attendance at each of my review hearings.
- 5.12 I acknowledge, understand, and agree to comply with any and all other rules and conditions placed upon me by this Agreement and the Handbook regarding treatment and outside support meetings.

VI. COMMUNITY CONTROL OR ILC SUPERVISION

- 6.01 I agree to abide by the rules of community control or ILC and be supervised by the Warren County Court Services Division.
- 6.02 I agree to participate in and comply with the supervision of my probation officer during my time in WCVHC.

- 6.03 I understand that I may be ordered to wear a GPS monitor for some or all of my time in the WCVHC program.
- 6.04 If I am placed on curfew, I understand that the hours of my curfew shall be established by the WCVHC Treatment Team. If my hours have not otherwise been established, my curfew shall be from 10:00 PM to 6:00 AM the following morning.
- 6.05 Unless the WCVHC Judge determines I am indigent, I agree to pay the costs of a GPS monitor as set forth in the Handbook.
- 6.06 I understand that a change in my residential address must be approved by my probation officer prior to the change.
- 6.07 I understand that I will be subject to home visits at my residence and/or place of my employment at any time during my participation in WCVHC.
- 6.08 I understand that, in order to leave the State of Ohio or go beyond 30 miles from my residence, I must request and obtain a Travel Permit from a member of the WCVHC Treatment Team.
- 6.09 Unless the WCVHC Judge determines I am indigent, I agree to pay the sum of \$360 as a probation supervision fee.
- 6.10 I acknowledge, understand, and agree to comply with any and all other terms and conditions placed upon me by this Agreement and the Handbook regarding my community control or ILC supervision.

VII. EMPLOYMENT

- 7.01 I agree to obtain and maintain full-time employment unless otherwise waived by the WCVHC Judge.
- 7.02 I agree to inform my probation officer of any change in my employment within 24 hours of the change. I understand that failing to notify my probation officer of any change may result in sanctions.
- 7.03 I understand that my being terminated from employment for just cause may subject me to sanctions.
- 7.04 I understand that voluntarily quitting my employment to prevent termination for cause may subject me to sanctions.

VIII. GENERAL TERMS

- 8.01 I understand my failure to attend a status review hearing, treatment session, drug screen, or probation appointment may result in a warrant being issued for my arrest.

- 8.02 I agree that I shall not freely associate with other people who may interfere with or impede my treatment and recovery.
- 8.03 Within my first phase of WCVHC, I agree to visit my local Veterans Affairs building to determine what services are available to me.
- 8.04 Within my first phase of WCVHC, I agree to produce my DD214.
- 8.05 Within my first phase of WCVHC, I agree to meet with and comply with the requirements of my VJO and Veteran Mentor.
- 8.06 I agree to connect with a Veteran Peer.
- 8.07 I agree that I shall not associate with anyone known to be actively involved in the sale or use of illegal substances.
- 8.08 I agree I will not freely associate with other people who may interfere with or impede my recovery. Issues regarding my spouse or significant other interfering with or impeding my recovery shall be addressed first with my treatment provider and then with the WCVHC Team and Judge.
- 8.09 I agree to report becoming romantically or sexually involved with another WCVHC program participant to my probation officer and treatment provider within 24 hours.
- 8.10 I agree to report any and all law enforcement contact to my probation officer within 24 hours of the contact.
- 8.11 I agree to be subject to any and all sanctions and incentives deemed appropriate by the WCVHC Team as outlined in the Handbook.
- 8.12 I agree not to make any threats towards any WCVHC staff member or participant. I also agree not to act in any violent manner at any time. If I make any threats or act in a violent manner, I understand I will immediately be unsuccessfully terminated from WCVHC and a violation will be filed against me in my criminal case.
- 8.13 I understand that in order for me to successfully complete WCVHC, I must demonstrate compliant behavior with the rules of WCVHC, the rules of this Agreement, and the rules of the Handbook. I must also successfully complete my individualized treatment plan, abstain from using drugs or alcohol, and pay my court-ordered financial obligations (unless deemed indigent).
- 8.14 I understand that failing to comply with the rules of the WCVHC Team, the rules in this Agreement, and the rules in the Handbook will result in a sanction. I understand that the

sanctions will be immediate and graduated, including the possibility of my being terminated from WCVHC.

8.15 I understand that my unsuccessful termination from WCVHC may result in a probation violation or ILC violation being filed against me and modifications being made to my community control.

8.16 I agree to always be **honest, open, truthful, and accountable** regarding my actions throughout my participation in the WCVHC Program.

Veterans Honor Court will comply with all constitutional and statutory rights regarding my participation. Any rights that are permitted to be waived by me are to be done in a manner ensuring my due process rights.

I have read and understand this agreement, freely and voluntarily relinquish the rights discussed herein, and agree to abide by all the rules and conditions of WCVHC.

Signature of Participant

Date

Signature of Participant's Attorney

Date

Initial: 2.22.18

Revised: 3.15.19/4.16.20 (2)/7.6.21/2.24.23/10.23.24/2.3.25