

Name: _____

Move in Date: _____

Within Reach West Virginia Program Accomplishment Guidelines

- Six to Twelve months residing in the Within Reach Facility. Six months if celebration of one year continuous sobriety comes during that six months. Same with incremental months. Overall, one year of continuous sobriety must be reached for a favorable referenced exit.
- Continuous, unbroken, Sobriety with a reported and celebrated sobriety date.
- Two Page Plan of Action to be reviewed by WRWV Directors
 - New design for living showing improvement of situation in society.
 - Goals in continued sobriety.
 - Restitution ready to be addressed including but not limited to:
 - Probation, Home Confinement, Parole, Fines, Fees, Victims, Court Costs, etc.
- Home Group Meetings Requirement: Continued documentation of home group attendance and keeping meeting attendance verification sheets throughout tenure at the Within Reach Facility. Meeting totals must equal or exceed 2/3rds days in living in facility. Example 6 months would require 119 meetings. 9 months = 178 meetings, etc.
- Sponsor Requirement: Short letter from 12-Step fellowship sponsor noting progress.
- Strict adherence to Within Reach West Virginia's Code of Conduct requirements (boundaries).
- Compliance with randomized drug testing schedule and documented report of test results.
- Critique and completion of the exit worksheet of the Within Reach West Virginia program.
- Attendance and participation in the 12 Steps to Freedom workshop and then sponsorship of another member through the 12 Steps to Freedom workshop after the attendance of the first workshop.
- Favorable reference, for court, employer or family, provided by a Director of Within Reach West Virginia.

Critique and Exit Worksheet

Date: _____

Name: _____ Sobriety Date: _____

Date Moved in Facility: _____ Planned Exit Date: _____

Exit checklist:

Continued Unbroken Sobriety: YES _____ NO _____

Two Page Plan of Action: YES _____ NO _____

Home Group Name: _____

Number of verified Meetings: _____

Sponsor Name: _____

Code of Conduct discrepancies: _____

Drug Testing Results: Date: _____ Result: _____

Date: _____ Result: _____

Date: _____ Result: _____

12-Steps to Freedom Workshop: Date: _____ Completion Date: _____

Date: _____ Completion Date: _____

Date: _____ Completion Date: _____

Did you feel you were part of a team and felt welcome while living in the WRWV facility?

What do you think WRWV can do, or do better, for the Facility clients?

Any recommendations? _____

Any complaints? _____

Are you willing or able to assist WRWV in any outside events as alumni of the WRWV program?

If Yes, please give some examples: _____
