

**WELLNESS DRIVER INTERVENTION PROGRAM  
72-HOUR RESIDENTIAL DIP COMPLETION REPORT (614-791-8300)**

Client Name: MARBLE, COLE

Date(s) of Attendance: From 10/20/2016 to 10/23/2016

Court Name: FRANKLIN

Case Number:

Attorney: BRIAN JOSLYN F#

Probation Officer:

The person named in this report participated in at least 21 hours of alcohol and drug addiction programming that included at a minimum:

- 01 Hour of screening and individual contact
- 15 Hours of client education on alcohol and drug abuse and addiction including traffic safety education
- 05 Hours of small group discussion

A screening interview was conducted with the client named above in which the results of the screening instruments, recommendations and referrals made to the referring court were discussed.

☒ YES    ☐ NO

**Summary of client's participation:**

Client was open and active from the onset of the program until completion. Client displayed a positive attitude and actively contributed until completion.

**Results and recommendations of the screenings:**

Screening results are negative.

Disclosure of information form attached: ☒ YES    ☐ NO

**Referrals made to alcohol and drug addictions treatment programs and any referrals made to other organizations:**

Columbus Health: 614-645-7417  
Directions Counseling: 614-888-9200  
<http://findtreatment.samhsa.gov/>

**Results and recommendations for alcohol and/or drug assessment:**

Based upon prior, recommend assessment.

**Recommendations made to court or other organization:**

Recommend assessment.

Signature and credential of staff making recommendations

Date

10-23-16