

Amethyst Foundation, Inc.
120 Hedding Road
Epping, NH 03042-1521

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603-679-2100
1-800-327-1114

I _____ agree to submit five (5) letters from responsible persons who can support my statements of abstinence, attendance at self help meetings and/or treatment. Letters must include all of the following that apply if I expect Amethyst Foundation to consider early issuance of my course completion.

1. What is the person's relationship to you?
2. How long has he/she known you?
3. How long have you been abstinent?
4. How does the person know that you have been abstinent?
5. How often do you attend self help meetings per week or month?
6. How long have you attended them (months or years)?
5. What positive changes have they noticed in you since you have been abstinent?
6. If they are in a self help program, how long have they been sober?
7. What risk, if any, does the person see for you to have another DWI?
8. Do they think you currently at an acceptable level of risk to be re-licensed?

Letters should be notarized and mailed to Amethyst Foundation Inc. for review. The Clinical Director will make the final decision.

If you have any questions please contact Amelia Spencer, Aftercare Coordinator, Monday through Thursday from 9:00 AM to 4:00 PM and on Friday from 9:00 AM to 1:00 PM. Thank you.

Client Signature

Date

White - Client

Canary-Amethyst