U.S. District Court for the District of New Hampshire

## **LASER Docket**

Law Abiding. Sober. Employed. Responsible.

## AGREEMENT

I, \_\_\_\_\_\_\_, am seeking permission to participate in the U.S. District Court, District of New Hampshire's LASER Docket. I understand that, if I am accepted into the LASER Docket, as a condition of my participation I must fully comply with all LASER phase requirements, and the counseling requirements and other requirements set forth below and in the Court's order(s) including, orders Setting Conditions of Release or of Supervision. I understand that failure to comply with the terms of this agreement or the Court's orders, may result in modification of release/supervision conditions and/or termination from the LASER Docket and/or revocation of bail/supervision.

- I have reviewed the Phase I, II, III, and IV requirements and understand that Phase Requirements are not suggestions, they are requirements for promotion. I understand that I must complete all Phase Requirements before I can be promoted to the next phase and/or graduate from LASER Docket.
- I agree that I will treat confidentially and will not disclose or discuss another LASER Docket participant's personal information, such as relapse, sanction, family, medical or financial information that is discussed in LASER Docket.
- I agree to have no contact or communication with other LASER Docket participants outside of the LASER Docket court sessions, unless pre-approved the probation office.
- I agree to commit no other violations of federal, state, or local law.
- I agree not to use alcohol or drugs, including synthetic drugs and bath salts or their derivatives, or any substances, including but not limited to substances that may not be controlled substances such as: poppy seeds, herbal products/supplements, Kratom, and CBD and THC products, that may cause a positive drug test, even if the substance may not be unlawful. I understand that I am responsible for all substances that I consume and for any resulting positive test result(s).
- I agree to immediately disclose any alcohol or drug use, and any other circumstance that might cause a positive drug test, to a member of the LASER Docket team.
- I agree to obey all instructions of the judicial officer of the U.S. District Court and the U.S. Probation Office.
- I agree to provide the U.S. Probation Office with my logins and passwords for any social networking groups that I belong to.
- I agree to abide by the following medical protocol conditions:

The defendant shall utilize one pharmacy and shall advise the probation office which pharmacy he/she is using.

The defendant shall utilize one hospital (unless transported by emergency personnel and unable to dictate which hospital he/she is to be transported to) and shall advise the probation office which hospital he/she will be utilizing.

The defendant shall pick a primary care physician to manage his/her medical care (if needed) and shall notify the probation office of the name, address, and phone number of the physician within one week of obtaining the services.

The defendant shall notify the probation office within 24 hours of any changes in his/her prescribed medication and prior to filling his/her prescription (unless it is an emergency situation).

The defendant shall execute releases of information allowing the probation office to access his/her medical records with hospitals, doctors, and pharmacies utilized by him/her.

The defendant shall notify all health care providers of the specifics of his/her substance abuse/addiction.

I agree to submit to drug testing as directed by the Court and the U.S. Probation Office. I understand that it is my responsibility to consume water such that it does not interfere with testing.

I agree to immediately enroll in the following substance abuse treatment program, and to abide by the rules and regulations of that program until clinically discharged:

I agree to sign a release of information to allow the probation office to speak with my counselor and/or receive treatment reports on a regular basis.

- I understand that I will be required to obtain a sponsor and attend self-help meetings, in addition to individual counseling sessions.
- I understand that I will be required to complete homework assignments given to me by the Court and/or probation office and agree to complete them in a timely manner.
- I understand that should I fail to appear for any LASER Docket session or related meeting/ hearing, violation proceedings may be initiated which may include the issuance of an arrest warrant.
- I agree to submit to a search of my person, residence, office or vehicle at a reasonable time and in a reasonable manner, based upon reasonable suspicion that contraband or evidence of a violation of a condition of release may exist. I also agree to warn any other residents that the premises may be subject to searches pursuant to this condition.

I agree not to associate with any persons engaged in criminal activity and shall not associate with any person convicted of a felony, unless granted permission to do so by the Court or the U.S. Probation Office. I understand that this includes restricting my ability to associate with LASER participants, unless authorized in advance by the Court or U.S. Probation.

- I understand that I must receive Court/Probation approval to maintain an existing relationship and/or for any contemplated relationship. I agree to disclose to the Court and Probation the person(s) who I am in a relationship with or who I am contemplating a relationship with. I understand that existing and contemplated relationships may be prohibited or restricted by the Court. I agree to abide by those prohibitions/restrictions.
- I agree to participate in a cognitive-behavioral treatment program (e.g., MRT) and follow the rules and regulations of that program. The probation officer will supervise my participation in the program (provider, location, modality, duration, intensity, etc.). Such programs may include group sessions led by a counselor or participation administered by the probation office.
- I agree to provide Probation with proof of High School diploma or GED, if applicable. I understand that if I am unable to provide this verification, I will be required to secure a GED/HiSET.
- I agree to authorize a credit report if requested by the Court/Probation.
- I understand that attendance at LASER Graduation ceremonies is mandatory.
- I understand that I must have reliable transportation and backup transportation plans so that I can attend LASER, counseling, self-help meetings, employment and other meeting/ appointment obligations. Transportation by/with another LASER participant is not permitted unless an exception is preapproved by U.S. Probation.
- \_\_\_\_\_ I agree not to engage in any gambling, betting or gaming activity, even if permitted by law.

I agree to disclose all sources of income, financial support or assistance, including any selfemployment or supplemental sources of income.

- I agree to promptly and accurately complete all information requests from the Court, Probation and/or LADAC.
- I understand that if I am terminated from LASER, as determined by the court after a team meeting and an opportunity to be heard, if requested, a bail hearing will be scheduled to determine my status pending my sentencing.

I have read and acknowledge that I understand the above terms and conditions of my participation in the LASER Docket and to agree to fully comply with those terms and conditions:

Participant

I have advised my client of the terms and conditions and believe that my client fully understands those terms and conditions, and knowingly and voluntarily seeks permission to participate in the LASER Docket:

Attorney for Participant

I recommend the above-named individual for participation in the LASER Docket for the District of New Hampshire:

Assistant United States Attorney

I recommend the above-named individual for participation in the LASER Docket for the District of New Hampshire:

U.S. Probation Officer

I approve the above-named individual for participation in the LASER Docket for the District of New Hampshire:

Honorable Joseph N. Laplante United States District Judge District of New Hampshire Date

Date

Date

Date

Date