



Racing Commissioner
 Office of Racing Commissioner
 PO Box 30773
 Lansing, MI 48909
 Phone: (517) 335-1420
 Fax: (517) 241-3018
 www.michigan.gov/horseracing

Office of the Racing Commissioner TERMINATION OF TREATMENT REPORT

Date Received at ORC

Instructions: This form is intended to be completed by an accredited substance abuse treatment provider to assist the Racing Commissioner in determining the continued suitability for licensing of racing industry licensees with positive drug or alcohol tests. Recommendations will be used to help determine whether the client can be re-licensed currently with minimal risk of another violation or whether an extended program of treatment will be necessary prior to consideration for re-licensing. Please direct any questions to Deputy Racing Commissioner at (517) 335-1420.

Client's Name		Date of Birth
Counselor's Name	Counselor's Phone Number	
Initial Contact Date	Last Contact Date	
Reason for Discharge		
Recommendation for Treatment from Assessment		
Initial Diagnosis		
Identified Presenting Problem/Reason for Service		
Summary of substance use history, treatment history and family/social history related to substance use		
Goals, Objectives and Interventions from Treatment Plan (For those receiving services beyond an assessment)		

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Dates of all scheduled appointments, indicate missed (M), cancelled (C) and attended (A)

For all attended appointments, indicate type of service that was provided (I) Individual, (G) Group, (E) Educational

Summary of Response to Treatment (Motivation, cooperation, goals/objectives achieved/not achieved, etc.)

Aftercare/Recovery Plan

Prognosis for Recovery and Other Recommendations

Discharge Diagnosis with Supporting DSM IV-TR Criteria

Signature and Credentials of Counselor

Date Report Completed

Waiver for Release of Information
I authorize this treatment provider to release any information related to my treatment to the Office of Racing Commissioner for use in determining my continued suitability for licensing.

Client Signature

Upon completion, please mail this form to the attention of Deputy Racing Commissioner at Office of the Racing Commissioner, P.O. Box 30773 Lansing, MI 48909 or Fax it to (517) 241-3018.