



Truthful Disclosure and Participation Agreement

I understand by signing this form, I agree that all of the information I gave is true and correct to the best of my knowledge. I understand giving false or untrue information is grounds for immediate dismissal from the Diversion program. I understand I will be expected to participate fully in all case management, self-sufficiency, and life skills classes. Failure to do so will be grounds for dismissal from the program. I will adhere to all rules and guidelines of Diversion program while a participant in it.

Name of Participant (printed)

Participant Signature

Date