



IMMERSION PARTICIPANT FORMS CHECKLIST

Prospective/Active Participant Name _____

Form	Date Completed	SVdP Facilitator(s)
Initial Contact Form – Prospective		
My 72-Hour Reentry Plan - Prospective		
Participant Intake Information - Active		
Participant Authorization for Release of Confidential Information		
Participant Waiver and Release of Liability		
Participant Background Check Waiver		
Participant Notice of Decision		



Form	Date Completed	SVdP Facilitator(s)