



**Metropolitan Nashville & Davidson County
Mental Health Court Supervision Contract/
Bond Condition Agreement (Informed Consent)**



As a condition of being a participant of the Mental Health Court, I understand that I must comply with the following rules. With my signature below, as witnessed by a member of the court staff, I attest that I fully understand these rules and agree to comply. I further understand that any violation of these rules will be reported to the Judge and may result in incarceration, removal from the program, or additional punishment. Requirements of the court are subject to change based upon order of the court or individual needs and progress.

1. I will notify the Mental Health Court staff of my new address & telephone number PRIOR to relocating & changing the information. All current and future living arrangements must be pre-approved by the Treatment Team.
2. I will obtain permission from the court staff prior to leaving Davidson County and/or the state of Tennessee. I will obtain permission before any overnight stays outside of my residence on record.
3. I will not reside or associate with anyone in active addiction or who is engaged in illegal activity.
4. Alcohol and/or illegal substances cannot be in my possession or in my residence, regardless of who it may belong to.
5. I will refrain from the use of **ALL** alcohol and drugs. This includes any over the counter items that may lead to a positive drug screen, poppy seeds, CBD products, kratom, and other non-FDA approved supplements. Any prescription medications should be on file with your Client Specialist and will need to be pre-approved.
6. I will avoid areas where illegal drugs are present and/or where alcohol is being sold or consumed.
7. I will submit to a drug screen if requested to do so by a member of the court staff. All drug screens will be conducted under direct observation. I understand that I am to provide a full, unadulterated sample upon request.
8. I will check in weekly, or as directed, with my assigned Client Specialist either in person or via telephone. I will also attend all court dates as directed.
9. I will appear in Mental Health Court or the Court office at any time/date as directed by staff.
10. I will not carry any type of weapon on my person. If prohibited from owning a weapon, there will not be weapons in my possession or in my residence.
11. I agree to pay all court costs and fines in this case unless declared indigent by the court.
12. I will allow a member of the court staff to visit me at my home or place of employment.
13. I will not engage in any criminal activity &/or behave with conduct contrary to good citizenship.
14. I will report **ALL** new criminal charges placed against me, whether it is by summons, citation, criminal warrant or indictment, to court staff immediately.
15. Any reports that I make to the court staff will be truthful and contain any and all information as required by these rules.
16. I will be compliant with any community service agency the court has deemed an appropriate placement for me. I will attend all appointments with my psychiatrist, take all medications as prescribed, engage with my therapist and work with the case manager assigned to my case.
17. I will adhere to all Phase requirements, sanctions, and or therapeutic adjustments ordered by the Mental Health Court Treatment Team. Further, I will comply with any special conditions of my supervision as part of my plea agreement.
18. I understand that the Mental Health Court program is a minimum of ____ months and progression through the phases is dependent upon my progress, compliance, and needs. While each Phase has a minimum time requirement, it may take longer to advance than the minimum time.
19. _____

Printed Name

Date

Client Signature

Judge Signature

Date

Client Specialist Signature