

An illustration of an alternative low cost incentive

RECOVERY ACTIVITY

Reward for any 3 connecting boxes down, across, diagonally

Complete bio-psycho-social assessment with your primary counselor _____	Complete vocational assessment with your vocational counselor _____	Be on time for one scheduled appointment _____
Provide one drug-free urine sample for opiates or _____ _____	FREE SPACE	Attend a 1:1 Session with your primary counselor _____
Pay your clinic bill or provide insurance card _____	Meet with vocational counselor for appointment _____	Complete 4 groups this month _____

Boxes must be initialed by staff.

This card is valid until: _____ This card was redeemed on: _____
Name: _____
Counselor's name: _____