

LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS TRIBAL COURT	WAABSHKI-MIIGWAN RELEASE OF CONFIDENTIAL INFORMATION	CASE NUMBER
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Court Address: 7500 Odawa Circle, Harbor Springs, MI

Court Phone: (231) 242-1462

Defendant's Name and Address: <p style="text-align: center;">DOB:</p>
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This agreement made and entered into this , between the Little Traverse Bay Bands of Odawa Indians (LTBB) and the participant, upon the advice and consent of his/her counsel.

1. I, do hereby authorize the release of any and all MEDICAL, PSYCHIATRIC, and PSYCHOLOGICAL evaluation reports and/or records to the Waabshki-Miigwan Drug Court Program (WMDCP) Coordinator. (____)
2. I, do hereby authorize the release of any and all ADULT CRIMINAL, and JUVENILE reports and/or records to the WMDCP Coordinator. (____)
3. I, do hereby authorize the release of any and all FINANCIAL reports and/or records to the WMDCP Coordinator. (____)
4. I, do hereby authorize the release of any and all ACEDEMIC reports and/or records to the WMDCP Coordinator. (____)
5. I, do hereby authorize the release of any and all ALCOHOL and/or SUBSTANCE ABUSE counseling and treatment reports and/or records to the WMDCP Coordinator. (____)
6. I, do hereby authorize the release of any and all MENTAL HEALTH reports and/or records to the WMDCP Coordinator. (____)

IT IS SO DATED THIS

Defendant

Waabshki-Miigwan Drug Court Program Coordinator