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SECOND CHANCE AGREEMENT

Date

I _____ hereby agree that I have violated the terms of my Nonviolent Alternatives Enrollment Agreement. In order to remain active and avoid unsuccessful discharge, I agree to the following:

1. Beginning immediately, and lasting until my past due balance is zero, all classes I attend will be "non-credit" deferred classes and will not count toward completion of my program.
2. I will have no absences.
3. If a second chance class is held, I will attend whenever and wherever it is held.
4. I will incur a fee of \$5 per session for deferred classes even though these classes do not count toward completing my original agreement.
5. I will still incur a late payment fee of \$5 per week for any week I don't pay at least the minimal amount specified in my original agreement.
6. I will still be held accountable to comply with all other terms of my original agreement.
7. I can be unsuccessfully discharged if I have not returned to normal, active status within five weeks.

I understand I'm being given a second chance to successfully complete my program. Should I choose to violate any of the above terms, I will be considered to be voluntarily withdrawing from the program and a letter will be sent to my referral source stating I have been unsuccessfully discharged.

Client Signature

Witness Signature