

## WEEKLY UPDATE FOR POWER FORWARD SOBER LIVING SCHOLARSHIP PROGRAM

NAME:	DATE:
EMAIL:	PHONE NUMBER:
NAME & ADDRESS OF SOBER HOME:	
Did you complete your three goals you set out to accomplish? Yes / No	
How many meetings did you attend last week?	
Do you have a sponsor yet? Yes / No	
Did you attend any individual counseling? Yes / No	
Did you attend any group counseling? Yes / No	
What job interviews did you have? Have you found a job?	
List three positive experiences you had last week:	
List one thing you learned last week:	
List three goals you set out to accomplish this week:	