

REAL DEAL RECOVERY

WEEKLY RESIDENT ACCOUNTABILITY FORM

Resident Name: _____

Week of: _____

Date: _____

RECOVERY ACCOUNTABILITY

1. Do you currently have a sponsor?

- ☐ Yes
- ☐ No
- ☐ I am actively looking for a sponsor

Sponsor Name: _____

2. When did you last meet with your sponsor?

Date: _____

3. How many recovery meetings did you attend this week?

Number of meetings: _____

Types of meetings attended:

4. What step are you currently working on?

Step #: _____

What are you currently working on related to this step?

HOUSE ACCOUNTABILITY

5. Did you complete your required deep clean this week?

- ☐ Yes
- ☐ No
- ☐ Not yet, but it is scheduled

Date deep clean was completed: _____

What area did you deep clean?

6. What do I need to work on this week?

7. What went well this week?

MY GOAL FOR NEXT WEEK

One thing I am committed to doing next week:

RESIDENT ACCOUNTABILITY

I understand that this form is an opportunity to be honest about my recovery, responsibilities, progress, and areas where I need additional support. I understand that accountability and honesty are important parts of my recovery.

Resident Signature: _____

Date: _____

STAFF REVIEW

Staff Member: _____

Date Reviewed: _____

Staff Notes / Follow-Up Needed:

Follow-up required?

- ☐ No
- ☐ Yes

Staff Signature: _____