

SPONSOR INFORMATION SHEET

Case Manager: _____

Sponsor Name: _____

Contact Number: _____

Sobriety Date: _____

Sponsor's Home Group: _____

Client's Home Group: _____

Normal group attendance
schedule: _____

Client Interview:

Sponsor's impression of client (what step client should begin on, recommend meeting attendance
schedule, extracurricular activities recommended, recommend reading),
etc... _____

I, _____, agree to serve as a sponsor
for _____. I pledge to support this individual in their recovery process
and be available to them as needed and to maintain open communication which will enhance the
relationship between the Sponsor and Client.