

# Special Supervision Enrollment Form



You must have a hearing at the Department of Motor Vehicles before enrolling into the Special Supervision program. After the hearing you will be issued an approval for the next step, a letter that expires after 30 days. Bridgeway Center, Inc. Driving Schools **will need a copy of this letter at the time of screening.**

First Name	
Middle Name	
Last Name	
Address	
City	
State	Zip
Home Phone (       )	
Work Phone (       )	Ext
Mobile Phone	
Email Address	
Emergency Contact Phone	
Emergency Contact	
Emergency Contact Address or Relationship	
Your County of Home or Work	
How did you Hear of Our Program? (Please Circle)	
Attorney	Court Order
DHSMV Order	Friend
Law Enforcement Officer	Mailer
Insurance Company	Other
Disability	
Are you required to have the Ignition Interlock Device placed on your vehicle?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Today's Date /      /
Social Security Number
Date of Birth /      /
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

PLEASE CIRCLE	
Married Status	Race
Married Never Married Divorced Widow Living Together Separated Other	Asian Black Hispanic Native American White Other
Education	Military Experience
8 <sup>th</sup> Grade or Less Some High School GED HS Graduate Some College Tech / Business College Grad Professional Grad	Air Force Army Coast Guard Marines National Guard Navy Other Country None

Job / Occupation	
Place of Employment	
Florida Driver License # / I.D. #	
<div style="display: flex; align-items: center; gap: 5px;"> <div style="border: 1px solid black; padding: 2px 5px;">F</div> <div style="border: 1px solid black; padding: 2px 5px;">L</div> <div>-</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> <div>-</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> <div>-</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> <div>-</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> <div>-</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> </div>	
Initials of State and Out of State DL#	

**DUI SPECIAL SUPERVISION SERVICES**  
**SUMMARY OF COSTS**

1. **\$56.00** (cash, money order or credit card) pre-screening fee. The screening is completed before registration to determine preliminary eligibility. This includes **\$16.00** for a copy of your Florida driver record from the DHSMV, **\$15.00** Enrollment Trust Fee, and **\$25.00** for the Pre-Screening Face-to-Face appointment. Your driving records will be obtained every 6 months and payment will be required. There will be a Special Supervision annual fee of **\$15.00** due at the anniversary of your screening.
2. **\$276.00** (cash, money order or credit card) paid in full when registering with the DUI Program for Special Supervision Services. This includes a **\$5.00** for the RRI test. You will also be required to perform a urinalysis; the fee will be **\$50.00** (cash or credit card) and will be paid at the lab.
3. **\$55.00** fee for non-Interlock clients and **\$65.00** fee for Interlock clients for each supervision session (monthly for the first year and each year that you are still on Interlock).
4. After you are accepted into the program, your evaluator may request a urinalysis at any time, the fee will be **\$50.00** and will be paid at the lab.
5. **Keep in mind of any** reinstatement fees and outstanding fees you may owe to the Department of Motor Vehicles. There may be additional costs if you have other traffic offenses on your record that must be reviewed/processed. The Driver License Office can give you an exact amount of this expense.
6. Cost of whatever vehicle insurance coverage you are required to maintain.
7. Cost of treatment provided by another agency if referred for additional counseling as a condition of approval of this program.
8. You must have a photo ID and 3 References (names, addresses & phone numbers) at the screening and application appointment.
9. Bring in the letter from the DHSMV showing proof of your hearing.
10. The following fees may apply: **\$1.00** per page for copies of records



137 Hospital Drive  
Fort Walton Beach, FL 32548  
Phone: (850) 200-0130 Fax: (850) 833-9150

## SPECIAL SUPERVISION SERVICES PROGRAM OVERVIEW

As a result of multiple DUI convictions, your driving privilege has been suspended by a judge and/or the Department of Highway Safety and Motor Vehicles (DHSMV). You cannot legally drive for this suspension period. The DHSMV has set up the Special Supervision Services (SSS) program to reward those people who have made significant lifestyle changes and are committed to continue an alcohol and drug free lifestyle. The SSS program is governed by very strict rules outlined in the DUI Administrative Rules. A person can remain in the SSS program and retain their Business Purposes Only driving privilege (Employment Purposes Only driving privilege for permanent revocations) if they adhere to these rules.

The processes for acceptance into the SSS program are outlined below. **The acceptance process can take up to six (6) months from the date of your hearing with the DHSMV.**

1. Have a hearing at the Department of Motor Vehicles (Pensacola office).
2. Come by the DUI Program office in Fort Walton Beach (or Crestview by appointment only). **Present the hearing letter from the DHSMV, fill out the Screening Form and pay \$56.** If you are an out-of-state applicant, you will need to provide a copy of your statewide driving and criminal record from the state you are currently residing. Out-of-state applicants may submit the paperwork by fax, email, or mail.

At this time, you will schedule the Pre-Screening appointment. This is a 30-minute appointment with the SSS Evaluator. The Evaluator will review all the expectations of the program, the process of the screening and intake processes, timelines, fees, and guidelines you should expect once you are accepted into the program if you meet all the admission criteria. You will be afforded an opportunity to ask any questions during this time. Out-of-state applicants may complete this appointment by phone.

3. After your Pre-Screening, if you decide that you would like to move forward with the application process for Special Supervision Services, you may schedule your Intake Appointment. Prior to your Intake Appointment, you will need to submit a list of your references (personal, legal, medical, ect). This appointment can take up to 2-hours and the remaining balance is due. The remaining cost for intake is **\$276** (cash, credit card, or money order).
4. After you complete the enrollment appointment, you will wait for a call from this office to set up an appointment for your Psychosocial Evaluation. **The wait for this can take 6-8 weeks (or longer).**
5. You will come into the FWB office for an Evaluation. There is no charge for this appointment. After you complete the Evaluation, your case will be reviewed by the clinical team for approval.
6. **After 1-2 weeks following your Evaluation appointment, you will receive a letter from the DMV authorizing you to go to their office and receive your Business Purposes Only license.**

7. You will also receive a letter from this office instructing you to set up your first monthly appointment. You need to either stop by the office or call the office and set up the appointment within 5 business days of receiving the letter. This means you will more than likely begin participation in the program prior to reinstating your license.

Once you are accepted into the SSS program, some of your responsibilities for maintaining your Business Purposes or Employment Purposes Only driving privilege are as follows:

1. You must complete a Periodic Update appointment once per month at the Driving Schools office. The cost for these appointments is \$55 or \$65 payable at the time of the appointment. **The appointments last up to 45 minutes.** All appointments must be conducted in person at the Bridgeway Center, Inc. Driving School. Most of the time, you will receive the date and time of your next appointment one month in advance.

**\*\*\*\*There are absolutely NO exceptions to the appointment being “in-person”. This is a requirement from the State of Florida, based on the Administrative Rule. \*\*\*\***

- a. If you need to re-schedule a Periodic Update appointment, you must do so five days in advance or pay an additional \$55 re-scheduling fee.
  - b. If you are unable to pay for your appointment, you will not be seen. You will have missed the appointment. If you are late for a scheduled appointment, you have missed the appointment. You will be scheduled another appointment within the required timeframe. There is a \$55 rescheduling fee due at the time you reschedule this appointment, at the rescheduled appointment you will then be charged your regular \$55 or \$65 fee.
  - c. If you do not show for a Periodic Update appointment, you will be required to pay this re-scheduling fee. If you do not re-schedule a missed Periodic Update appointment within five days of the original appointment, you will be cancelled from the program, which will invalidate your Business Purposes or Employment Purposes Only license. You will have to re-apply for the SSS program.
2. **You must remain alcohol free throughout your participation in the SSS program.** You cannot consume any alcoholic beverages in any amount. You cannot consume so-called alcohol-free beer or wine which contain 0.5% alcohol. You may not take another person's prescription medication. You may not use any illegal drugs. You may only take prescription medication prescribed to you; you must comply with all warning labels. You may only take over-the-counter medication in the dosage and for the symptoms as listed on the packaging. You must not take over-the-counter medicine which contains alcohol.
  - a. Any alcohol use or illegal drug use will result in immediate cancellation from the SSS program.
  - b. If you are cancelled from the program for alcohol or drug use, you are ineligible to reapply for the program and must serve out the remainder of your suspension period.



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3. A case management plan will be formulated for you. **You must comply with these requirements to remain in the SSS program and retain your Business Purposes or Employment Purposes Only driving privilege.** Elements of the case management plan may include the following: required attendance at AA or NA meetings, completion of counseling including Aftercare counseling, completion of a 12-step Workbooks. You will be notified of your personalized case management plan when you receive your letter of acceptance into the SSS program from the Special Supervision Services Program.

**Medical records** will be obtained to verify any medications you may be taking and to review your current physical condition.

4. Your SSS Evaluator will notify you of all other requirements of the SSS program, should you chose to continue the application process and are accepted into the program.

**This program is strictly monitored by the Florida Department of Highway Safety and Motor Vehicles, DUI Programs Section. If you are unable to afford the set fees for this program or are unwilling to comply with the rules of this program, please discontinue the application process. Exceptions to the fees or rules cannot be made. You are in no way obligated to participate in this program. You may serve out the driver license suspension to which you were sentenced and receive a regular driver license at the end of this period.**

By signing below, I acknowledge receipt of this document. I have reviewed this document and agree to comply with the process and rules set forth therein.

\_\_\_\_\_  
**Client signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Witness signature**

\_\_\_\_\_  
**Date**

cc: client file  
sss (revised 11/03/2025)

***Bridgeway Center, Inc.***  
***Special Supervision Services Screening Form***

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Revocation Period: \_\_\_\_\_ DUI Conviction Dates: \_\_\_\_\_

1. Have you completed the multiple offender DUI program since your last DUI?  
☐ Yes ☐ No If yes, when and where did you complete? \_\_\_\_\_

Copy of completion certificate attached: ☐ Yes ☐ No

2. Were you referred to treatment by the evaluator at your last multiple offender DUI program? ☐ Yes ☐ No If yes, when and where did you complete treatment? \_\_\_\_\_

Copy of completion certificate attached: ☐ Yes ☐ No

3. When have you driven any type of motor vehicle since your license was revoked? \_\_\_\_\_ During that time had you been ticketed or arrested for any kind of traffic offense? ☐ Yes ☐ No If yes, what were the charges? \_\_\_\_\_

Do you have any unpaid tickets and/or fines for traffic infractions? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

4. Have you been incarcerated during the license revocation period? ☐ Yes ☐ No

For what reason: \_\_\_\_\_

Date of Release: \_\_\_\_\_

5. Have any judgments been levied against you resulting from accidents wherein you did not have insurance? ☐ Yes ☐ No If yes, please explain: \_\_\_\_\_

6. How often do you presently consume alcohol, including the so-called non-alcoholic beers or wines which contain less than .5% of alcohol? \_\_\_\_\_

7. When was the last time you consumed any alcohol, including the so-called non-alcoholic beers or wines? \_\_\_\_\_

8. How often do you presently use prescription drugs, over-the-counter drugs or any other kinds of drugs? \_\_\_\_\_

Which drugs do you use? \_\_\_\_\_

How long has it been since you last used any of the above drugs? \_\_\_\_\_

9. Have you taken anyone else's medication for any reason during your revocation period? ☐ Yes ☐ No If yes, please explain when, what, why it was taken and your relationship to the person whose medication you took. \_\_\_\_\_  
\_\_\_\_\_
10. Has your license been suspended, canceled, or revoked in any state?  
☐ Yes ☐ No If yes, which state(s)? \_\_\_\_\_  
\_\_\_\_\_
11. During your revocation period, have you been arrested or convicted for an alcohol drug or substance abuse related issue? ☐ Yes ☐ No If yes, when, where, and for what? \_\_\_\_\_  
\_\_\_\_\_
12. Have you applied for the Special Supervision Services program at any other DUI program(s) in the state of Florida? ☐ Yes ☐ No If yes, where and when and what was the outcome? \_\_\_\_\_  
\_\_\_\_\_
13. Are you aware that your application to the DUI Special Supervision Services will cost \$332.00 (total) plus the cost of objective testing and that this money is not refundable? ☐ Yes ☐ No
14. What are the reasons you are abstaining from alcohol and other drugs? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. How do you currently maintain your abstinence from alcohol and other drugs?  
\_\_\_\_\_  
\_\_\_\_\_
16. Additional comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
17. Recommendations to applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
DUI Program Representative

\_\_\_\_\_  
Date