

OWI 2 WEEKEND PROGRAM (96 Hour Program)

In compliance with your court order, you are required to attend the OWI 2 Weekend Program provided by Des Moines Area Community College. The purpose of the program is to teach participants facts about alcohol use and abuse, and to encourage low risk choices in the use of alcohol. Your attendance at this program will also fulfill your required 96 hours of jail time. Please review all the material contained in this registration packet.

Schedule:

To view upcoming class dates and to review the most up to date COVID protocols please visit <https://ce.dmacctraining.com> or call 515-964-6800.

Check-in time: 5:00 - 5:30 p.m. both Friday's

Check-out time: 5:00 p.m. both Sunday's

Class Location:

Walnut Creek Days Inn
1258 8th Street
West Des Moines, IA 50265

Getting To The Hotel from:

North

I-35 S Merge On I-235 W, Exit Number 3, R On 8th St. R On Office Park Road. Hotel On L

South

I-35 N Exit On I-235 E, Exit Number 3, R On 8th St, R On Office Park Road, Hotel On L

East

I-235 W, Exit Number 3, R On 8th St, R On Office Park Road, Hotel On L

West

I-235 E, Exit Number 3, R On 8th St, R On Office Park Road, Hotel On L

Airport

N On Fleur Road, L On Park Ave, R On 63rd, L On Ashworth R On 8th St, Hotel On L Side

How to Register:

Online: ce.dmacctraining.com

In Person: DMACC Southridge Center (Southridge Mall)
1111 E. Army Post Rd., Suite 2004
Des Moines, IA 50315

Phone: 515-964-6800

Fee: \$850.00 – Double Occupancy
\$1,250.00 – Single Occupancy (Limited Availability)

Payment method: Cash, Credit or Debit Card, Money Order or Cashier's Check
Personal checks will NOT be accepted

Deadline: Registrations must be received ONE WEEK prior to your first class date.

Accommodations:

Lodging will be in double occupancy rooms unless single occupancy is requested and paid for. Linens and towels are provided. Room fees are included in the overall course fee. You will be expected to keep the area neat and clean, returning the facility to its initial condition prior to your arrival for the program. At no time are males or females allowed to enter the sleeping areas of the opposite sex.

Meals will be served on Saturday and Sunday only and are included in the overall fee. There is NO meal served on Friday night.

Please indicate on the Health Questionnaire Form any specific dietary or medical needs you may have. If you need other special accommodations, please notify us at least **two weeks** in advance.

What to Bring:

Bring your own personal writing instrument – (pen or pencil).

You will be asked to show a **picture ID** upon arrival. If you do not have your Driver's License, you may use any of the following as long as they display your name and picture: work or school ID, business card, store or organization membership card, or passport.

Personal belongings should be kept to a minimum and will be your own responsibility. **Please do not bring anything of value, INCLUDING LAPTOP COMPUTERS, IPODS, MP3 PLAYERS.** Bring casual, comfortable clothing for the weekend, and personal hygiene items (toothbrush, etc.). You may bring snacks or cash to purchase snacks. **Do not bring electronic devices. Cell phones need to be shut off during class and at night.**

Your luggage will be searched upon arrival. You and your luggage will be subject to search during the program if there is any reason to believe you possess any type of contraband or have used alcohol or illegal drugs.

Please bring all prescription and non-prescription **medicine** you will need for the weekend. Medicine must be in the original pharmacy container with the doctor's prescription information attached. Non-prescription medication must be in the original container with the label attached.

Arrival and Check-in Procedure:

If you do not have a current driver's license, please make appropriate transportation arrangements. If driving, you will be required to show a valid driver's license and surrender your car keys at the time of check-in.

Check-in is between 5:00 p.m. – 5:30 p.m. on Friday evening with a breathalyzer test and luggage search. **Zero Tolerance is enforced.** Anyone arriving for class under the influence of alcohol or drugs will be dismissed and, if applicable, be subject to immediate arrest. You should abstain from drinking a minimum of 24 hours prior to attending the class.

Class begins promptly at 6 p.m. Anyone arriving after the class has started will be denied entrance to the program and referred back to the court. You will also forfeit your payment. For this reason, please ask your driver to stay until you are checked-in.

Conduct:

There will be a deputy sheriff on the premises from 10 p.m. to 7 a.m. both Friday and Saturday nights. They are here for your protection as well as to maintain order. Please feel free to contact them if you have any problems or concerns.

- No visitors will be allowed at any time.
- Cell phones may be used during breaks, but must be turned off during class and at night.
- Use of illegal, mood altering chemicals or illegal drugs will not be allowed.
- Smoking, or use of any tobacco product, will be permitted only in designated areas.
- Gambling activities will not be allowed.
- Weapons will not be allowed at any time.
- Loud, abusive, offensive, or disruptive conduct, language, or clothing will not be tolerated.
- No one will be allowed to leave the facility. During breaks/free time you must stay within eyesight of the building at all times.
- You must report to the sleeping area at approximately 10 p.m. following the evening sessions.
- You will be expected to respect the property rights of others and will be held responsible for any loss or breakage.

Successful Program Completion:

A completion certificate will be issued to you at the end of the class the second weekend. **You are responsible for the distribution of that letter to your probation officer, the clerk of court, and/or your attorney, if necessary.** DMACC will electronically file your completion information with the DOT within 2 business days after the completion of class.

Failure to Complete the Program:

Any violation of the instructions contained in this letter or given by the instructors, program staff, or security personnel will subject you to dismissal from the program, notification of your probation officer or judge, possible charges of contempt or probation violation, and forfeiture of all program fees. All provisions of the court order will be enforced.

If you will be unable to attend your scheduled (2) weekend program, please call our office no later than 48 hours prior to check-in time to avoid forfeiture of program fees. Those leaving at any time during the program will forfeit their payment and must call our office to reschedule the entire (2) weekend program.

If you have further questions regarding this program, please contact our office at 515-964-6800.

**DES MOINES AREA COMMUNITY COLLEGE
OWI 2 WEEKEND PROGRAM
Health Questionnaire**

For Office Use Only
CRN: _____
SAFE: _____

Dates of 1st Weekend: _____
Dates of 2nd Weekend: _____

This information is required for your protection and the protection of others. Pursuant to Section 2.7(1), Code of Iowa, your response will remain confidential.

Name: _____
Last First M.I.

Are you currently ill: Yes No If yes, name of illness and duration: _____

Please check if you have any of the following: Asthma Hepatitis B Hepatitis C Diabetes
 HIV/AIDS Diabetes Seizures Heart Disease High Blood Pressure Tuberculosis

Please list all current medications: _____

Are you currently injured: Yes No If yes, date injury occurred: _____

Explain the type and cause of injury: _____

Have you ever been treated for a mental condition: Yes No
If yes, date of treatment: _____ Location of treatment: _____

Are you now, or have you ever been suicidal: Yes No

Please list any special accommodations needed:
Medical/Disability: _____
Dietary: _____
Other: _____

Emergency Contact: _____ Phone: _____

Release of Liability

I, _____, in consideration of being allowed to participate in the Polk County Residential Program for OWI Offenders,
(Print Full Name)
hereby release, acquit, and forever discharge Polk County, its employees, officers and directors, and Des Moines Area Community College, its faculty, employees, officers and directors, from any and all liability whatsoever in connection with any injury or claim of any type or nature arising out of participation in the Program. This release includes, but is not limited to, claims for personal injury, libel, slander, defamation of character, invasion of privacy, or any other claim or cause of action, whether based upon statute or common law.

Signature: _____ Witness: _____

Des Moines Area Community College shall not illegally discriminate on the basis of race, color, national origin, creed, religion, sex, age, or disability. Any inquiries may be directed to the EEO/AA Coordinator, Denise Lundberg: delundberg@dmacc.edu

