Name:	Date:
	ug ction
Addi	ction
How will your life change if you choose to either continue or quit using drugs and alcohol?	
My career, school, or profe	ssional life will be affected
If I continue using:	If I quit using:
My relationships with my family a	nd other loved ones will be affected
If I continue using:	
ii i continue using.	If I quit using:
n r continue using.	If I quit using:
71 7 continue using.	If I quit using:
71 7 Continue using.	If I quit using:
Treating.	If I quit using:
	If I quit using:
My relationships with	
	friends will be affected
My relationships with	friends will be affected
My relationships with	friends will be affected
My relationships with	friends will be affected