

# REFERRAL FORM

## SLV Comprehensive Community Mental Health Center

Mental Health Program – Sex Offender Treatment Program – Mi Esperanza

Addictions Recovery Center – Friends of the Family

8745 County RD 9 S, Alamosa, Co 81101 (719)589-3671 \*\*\* 402 4<sup>TH</sup> St., Monte Vista,  
CO 81144 (719) 852-5186

Referring Agency/Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Client Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Client Address: \_\_\_\_\_ Phone: \_\_\_\_\_

If a minor, who retains custody ? \_\_\_\_\_

REASON FOR REFERRAL (Current issues, problems, or complaints):

BRIEF CLIENT HISTORY: (Please check all that apply, past or present, and explain).

### MENTAL HEALTH

Previous treatment in community \_\_\_\_\_

Previous treatment in corrections \_\_\_\_\_

Previous psychiatric hospitalization(s) \_\_\_\_\_

History of psychiatric diagnosis; what ? \_\_\_\_\_

Other \_\_\_\_\_

### LEGAL ISSUES

Has current charge(s) \_\_\_\_\_

History of parole/probation \_\_\_\_\_

Previous arrests (types and charges) \_\_\_\_\_

History of assault charges \_\_\_\_\_

History of domestic violence \_\_\_\_\_

History of sexual offenses(s) \_\_\_\_\_

Other \_\_\_\_\_

### DRUGS AND ALCOHOL

Previous drug and/or alcohol treatment \_\_\_\_\_

History of drug or alcohol problems \_\_\_\_\_

History of drug or alcohol charges \_\_\_\_\_

History of positive UA's \_\_\_\_\_

\*\*\*\*\*For Office Use Only\*\*\*\*\*

### INITIAL MENTAL HEALTH RECOMMENDATION(S):

Indv./Fam. Outpatient Treatment

Psychiatric Medication Evaluation

Psychological Evaluation

Sex – Offense-Specific Eval./Treatment

Family Preservation Services

Assertive Community Treatment

Confronting Criminal Thinking Group

Anger Management Group

Domestic Violence Group

Substance Abuse Treatment

Other \_\_\_\_\_

DATE REC'D: \_\_\_\_\_ Intake Date: \_\_\_\_\_ Intake Worker: \_\_\_\_\_

Primary Therapist: \_\_\_\_\_ Billing Source: \_\_\_\_\_

Comments: \_\_\_\_\_

\* A copy of this form will be returned to the referring agency/worker upon completion of intake and case assignment (REV 6/02)