

VETERAN/DRUG/DUI COURT  
SCREENING/REFERRAL FORM

\*Please write legibly\*

Client Information

Full Legal Name \_\_\_\_\_

A/K/A \_\_\_\_\_

Currently in Custody? \_\_\_\_\_ Y \_\_\_\_\_ N DLM# \_\_\_\_\_ DOC# \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_ SS# \_\_\_\_\_

Client address: \_\_\_\_\_

Street City Zip Code

Client Phone: (home) \_\_\_\_\_ - \_\_\_\_\_ (cell/other) \_\_\_\_\_ - \_\_\_\_\_

Lives with: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone: (home) \_\_\_\_\_ - \_\_\_\_\_ (cell/other) \_\_\_\_\_ - \_\_\_\_\_

Veteran Information (if applicable)

Branch of service \_\_\_\_\_

Date of service \_\_\_\_\_

Combat zone \_\_\_\_\_

Criminal Information

Attorney: \_\_\_\_\_ Phone: \_\_\_\_\_

Current charge(s): \_\_\_\_\_ Case #: \_\_\_\_\_

\_\_\_\_\_ Case #: \_\_\_\_\_

\_\_\_\_\_ Case #: \_\_\_\_\_

Has client ever been arrested for a violent felony and/or sex crime? \_\_\_\_\_ Y \_\_\_\_\_ N

Is client subject to a Protective Order? \_\_\_\_\_ Y \_\_\_\_\_ N

Is client currently on probation or parole? \_\_\_\_\_ Y \_\_\_\_\_ N

If yes, Probation / Parole Officer's Name: \_\_\_\_\_

**BOLDED ITEMS ARE MANDATORY!**

**Current substance abuse treatment?** \_\_\_\_\_ Y \_\_\_\_\_ N **If yes, agency:** \_\_\_\_\_

**Prior mental health treatment?** \_\_\_\_\_ Y \_\_\_\_\_ N **If yes, agency:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

**Have you previously been prescribed medication?** \_\_\_\_\_ Y \_\_\_\_\_ N **If yes, please list:**

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

**Prior substance abuse treatment?** \_\_\_\_\_ Y \_\_\_\_\_ N **If yes, agency:** \_\_\_\_\_

Client waiver information:

**1. I wish to apply to the Tulsa County Drug/DUI Court Program or Veteran's Court:**

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

**Defendant / Client Signature**

Please return completed form to Drug / DUI Court Inbox tray on the third (3rd) Floor