



## Jackson County Wellness Court Referral

Please send the completed form to [Shannon.J.Larsen@ojd.state.or.us](mailto:Shannon.J.Larsen@ojd.state.or.us)

### ***Eligibility is determined by the Wellness Court Team.***

There are several factors that determine eligibility and no single factor controls the decision. The person must have a diagnosis of Schizophrenia, Schizoaffective Disorder, Bipolar Disorder, or (severe) Major Depressive Disorder to be considered. There should be a strong link between the person's mental illness and their charges. Applicants must be able and willing to do the program. Criminal history and dangerousness will be considered. Sex offenses/offenders are not eligible. Defendants must meet opt-out criteria for any Measure 11 charges. For more information, contact the **Coordinator, Shannon Larsen, at 541-776-7171 x71135.**

<b>Defendant's Name:</b>	<b>Date of Referral:</b>
<b>DOB:</b> <b>In Custody?</b> <b>yes</b> <b>no</b>	<b>Referred by:</b>
<b>Defendant's Contact Information</b>	<b>Referring Agency/Relationship:</b>
<b>Phone:</b>	
<b>Address:</b>	<b>Phone:</b>
<b>Other contact:</b>	<b>Email:</b>

<b>*Jackson County Circuit Court Case Number(s):</b>	
<b>Current Charges:</b>	
<i>*Defense Attorney will need to send all police reports.</i>	
<b>Defense Attorney:</b>	<b>Prosecuting Attorney:</b>

<b>Mental Health Diagnosis:</b>
<b>Substance Abuse Issues? (Briefly describe):</b>
<b>Why is this defendant a good referral for Wellness Court?</b> <i>(Observed behaviors, reported symptoms, connection between mental illness and incident, interest in treatment, etc.):</i>

\*\*\*WELLNESS COURT USE\*\*\*