



Wilson Counseling

LIFE CAN BE GOOD

REFERRAL FORM

- Standard Mental Health Assessment and Counseling
- Standard Substance Abuse Assessment and Counseling
- No-Cost Rapid Substance Abuse Assessment with Recommendations
- Drug screen
- Comprehensive Mental Health Evaluation (Court & DCBS)
- Co-parenting Counseling
- Family Counseling
- DUI Services
- Marijuana Expungement Class
- Couples Counseling (Marriage/Premarital)
- Mediation
- Collaborative Divorce Coach
- Targeted Case Management

CLIENT: _____

Name	Age	Insurance
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Contact Person: _____

Name	Phone Number	Relationship to Client
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Client to initiate contact Wilson Counseling to initiate contact

Specific Clinician Request: _____

Referral made by: _____

Name	Organization
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Email & Phone: _____

For staff use:
 Clinician Assigned _____