** Somerset County Health Department**

 8928 Sign Post Road, Suite 2, Westover, Maryland 21871

 443.523.1700 • Fax 410.651.5680 • TDD 1-800-735-2258

 Health Officer Lori Brewster, MS, APRN/BC, LCADC

**CLIENT SERVICES REFERRAL**

To Peer Support Specialist \_\_\_\_\_\_\_\_\_\_\_ To Re-Entry Coordinator \_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Date of Referral: |
| Name of Referred Client: |
| Client’s Address: |
| Client’s Phone Number: |
| Name of Person Making Referral: |
| Referring Agency: |
| Referring Party (if not agency centered): |
| Contact Information for Referring Party/Agency: |

**Type of Referral Needed:**

Housing \_\_\_\_\_\_\_

Identification (I.D.) \_\_\_\_\_\_\_

Insurance \_\_\_\_\_\_\_

Treatment (Mental Health or Substance) \_\_\_\_\_\_\_

Job Skills Training \_\_\_\_\_\_\_

Employment \_\_\_\_\_\_\_

Other (Please Explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Return this referral to the

Somerset County Health Department – Recovery and Re-entry Center

 11674 Somerset Avenue, Princess Anne, Maryland 21853

Phone: 410-621-5739 FAX: 410-621-5426