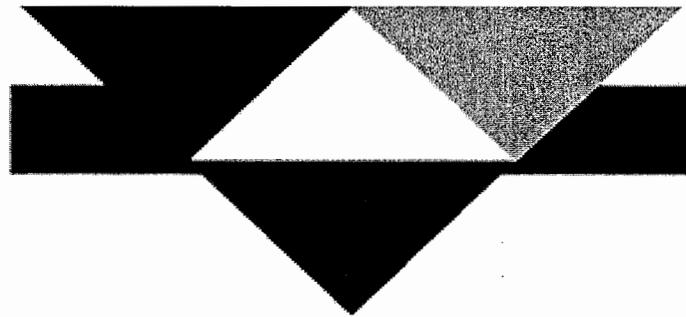




**MISSOURI DEPARTMENT OF**

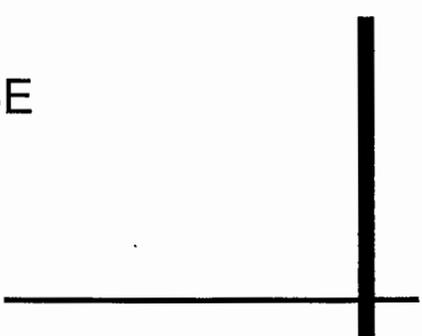
**MENTAL  
HEALTH**



**FACILITY DESIGNEE MANUAL  
FOR  
CIVIL INVOLUNTARY DETENTION**

DIVISION OF  
ALCOHOL AND DRUG ABUSE

Updated 2009



**TABLE OF CONTENTS**

Introduction.....2

96 Hour Civil Involuntary Commitment: Overview.....2

Professionals Who May Become Facility Designees.....3

96 Hour Alcohol and Drug Abuse Facility Designee Commitment.....4

96 Hour Alcohol and Drug Abuse Commitment: Voluntary Client Requesting Release...5

96 Hour Alcohol and Drug Abuse Commitment: Definitions.....6

Guidelines for Completing Applications.....7

Guidelines for Completing Affidavits.....8

Guidelines for Completing The List of Witnesses.....9

Admission of 96 Hour Commitments: Information Provided and Time Limits.....10

Notice of Rights.....11

Additional Inpatient Detention Beyond 96 Hours.....12

Liability.....12

Forms.....13

## INTRODUCTION

This Facility Designee Manual provides training for alcohol and drug abuse facility designees involved in the civil involuntary detention process. It is designed as a training and reference manual for those who are designated by the head of the facility to initiate civil involuntary detention. Civil involuntary detention procedures for alcohol and drug abuse are discussed. Definitions of important terms, procedural issues, timelines and the use of forms are explained. Citations and references from the *Revised Statutes of Missouri (RSMo.)* are also included.

Additional information regarding civil involuntary detention can be found in the Quick Reference Guide for Civil Involuntary Detention and in the Quick Reference Guide for Civil Involuntary Detention Forms which should be available at your facility.

Your local Probate Court may have procedures which differ from those in this Manual. In such cases, you should follow the directions of your local Probate Court.

## 96 HOUR CIVIL INVOLUNTARY COMMITMENT: OVERVIEW

A person who presents a likelihood of serious harm to self or others as the result of an alcohol and drug abuse may be involuntarily detained for evaluation and treatment at an alcohol and drug abuse facility recognized by the Department of Mental Health.

### **Facility-Based Civil Commitment**

This Manual will focus on commitment procedures that occur when a person who demonstrates an imminent likelihood of serious harm to self or others as the result of alcohol and drug abuse presents to a recognized facility. That person may be involuntarily detained upon application by a professional who has been designated by the head of the facility and approved by the Department of Mental Health.

### **Community-Based Civil Commitment**

A person in the community and not present at a recognized facility can be civilly committed by the Probate Court or by an imminent harm application completed by a Peace Officer. See the Quick Reference Guide for Civil Involuntary Detention for a discussion of these types of commitments.

## PROFESSIONALS WHO MAY BECOME FACILITY DESIGNEES

The following professionals must be designated by the head of the facility and approved by the Department of Mental Health to complete imminent harm applications. Facility designees are approved by the Department of Mental Health after the designee has received training on civil involuntary detention procedures.

**Mental health professional:**, a psychiatrist, resident in psychiatry, psychologist, psychiatric nurse or psychiatric social worker **632.005(12)**

**Psychiatrist:** a licensed physician who in addition has successfully completed a training program in psychiatry approved by the American Medical Association, the American Osteopathic Association or other training program certified as equivalent by the department **632.005(18)**

**Resident in psychiatry:** a licensed physician who is in a training program in psychiatry approved by the American Medical Association, the American Osteopathic Association or other training program certified as equivalent by the department **632.005(20)**

**Psychologist:** a person licensed to practice psychology under chapter 337, RSMo, with a minimum of one year training or experience in providing treatment or services to mentally disordered or mentally ill individuals **632.005(19)**

**Psychiatric nurse:** a registered professional nurse who is licensed under chapter 335, RSMo, and who has had at least two years of experience as a registered professional nurse in providing psychiatric nursing treatment to individuals suffering from mental disorders **632.005(16)**

**Psychiatric social worker:** a person with a master's or further advanced degree from an accredited school of social work, practicing pursuant to chapter 337, RSMo, and with a minimum of one year training or experience in providing psychiatric care, treatment or services in a psychiatric setting to individuals suffering from a mental disorder **632.005(17)**

**Licensed physician:** a physician licensed pursuant to the provisions of chapter 334, RSMo, or a person authorized to practice medicine in this state pursuant to the provisions of section 334.150 RSMo **632.005(8)**

**Registered professional nurse:** a registered professional nurse who is licensed under chapter 335, RSMo.

**Qualified counselor:** a person who provides substance abuse counseling and who meets the qualifications prescribed in the standards for certification of alcohol and drug abuse programs under rules promulgated by the department of mental health, as authorized by sections 630.050 and 630.655 RSMo" **631.005(4)**

**NOTE:** Qualified counselors can complete imminent harm applications ONLY to alcohol/drug abuse facilities (NOT mental health facilities).

**Note:** Licensed Professional Counselors are **not** eligible to complete imminent harm applications for civil involuntary commitment, unless otherwise qualified above.

## 96 HOUR ALCOHOL AND DRUG ABUSE FACILITY DESIGNEE COMMITMENT

If a person at an alcohol and drug abuse facility presents an imminent likelihood of serious harm due to a alcohol or drug abuse such that the person must be immediately detained, a professional designated by the head of the facility and approved by the Department of Mental Health (facility designee) may complete an **application for imminent harm admission** (*DMH 132 Application Imminent Harm*) and an **affidavit** alleging under oath (*DMH 142 Affidavit*) that the person suffers from alcohol and drug abuse and presents an imminent likelihood of serious harm. The facility designee must also provide a **list of witnesses** (*DMH 137 List of Witnesses*) who will be providing affidavits or testifying.

The facility designee must be designated by the head of the facility and must be a licensed physician, mental health professional (psychiatrist, resident in psychiatry, psychologist, psychiatric nurse or psychiatric social worker), registered professional nurse or qualified counselor. Facility designees are approved by the Department of Mental Health after the designee has received training on civil involuntary detention procedures (see previous section on Facility Designees).

### Forms

Completed by the facility designee (see section on Forms).

*DMH 132 Application Imminent Harm*  
*DMH 142 Affidavit*  
*DMH 137 List of Witnesses*

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632.305.4. If a person presents himself or is presented by others to a mental health facility and a licensed physician, a registered professional nurse or a mental health professional designated by the head of the facility and approved by the department for such purpose has reasonable cause to believe that the person is mentally disordered and presents an imminent likelihood of serious harm to himself or others unless he is accepted for detention, the licensed physician, the mental health professional or the registered professional nurse designated by the facility and approved by the department may complete an application for detention for evaluation and treatment for a period not to exceed ninety-six hours. The application shall be based on his own personal observations or investigation and shall contain the information required in subsection 1 of this section.

See **631.120** for alcohol and drug reference

See definitions for **alcohol abuse**, **drug abuse** and **likelihood of serious harm**.

## 96 HOUR ALCOHOL AND DRUG ABUSE COMMITMENT: VOLUNTARY CLIENT REQUESTING RELEASE

If a person voluntarily admitted at an alcohol and drug abuse facility requests release and, in the opinion of the head of the facility presents a likelihood of serious harm due to alcohol and drug abuse, the head of the facility may refuse the request for release and a professional designated by the head of the facility and approved by the Department of Mental Health (facility designee) may complete an **application for detention of a voluntary patient requesting release** (*DMH 133 Application Voluntary Patient Requesting Release*) and an **affidavit** alleging under oath (*DMH 142 Affidavit*) that the person suffers from alcohol and drug abuse and presents an imminent likelihood of serious harm. The facility designee must also provide a **list of witnesses** (*DMH 137 List of Witnesses*) who will be providing affidavits or testifying. The facility designee must be designated by the head of the facility and must be a licensed physician, mental health professional (psychiatrist, resident in psychiatry, psychologist, psychiatric nurse or psychiatric social worker), registered professional nurse or qualified counselor. Facility designees are approved by the Department of Mental Health after the designee has received training on civil involuntary detention procedures (see previous section on Facility Designees).

### Forms

Completed by the facility designee (see section on Forms).

*DMH 133 Application Voluntary Patient Requesting Release*  
*DMH 142 Affidavit*  
*DMH 137 List of Witnesses*

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631.110. 2. The head of an alcohol or drug abuse facility shall release any client who requests his release in writing or whose release is requested by his guardian or parent, if the parent applied for admission; except that, if the head of the facility believes the client is presenting a likelihood of serious harm as a result of the alcohol or drug abuse, the head of the facility may deny the request for release. If the request for release is denied, the head of the facility may detain the client only if he immediately initiates the involuntary detention procedure set out in this chapter.

See definitions for **alcohol abuse, drug abuse** and **likelihood of serious harm**.

## 96 HOUR ALCOHOL AND DRUG ABUSE COMMITMENT: DEFINITIONS

### **Alcohol abuse**

the use of any alcoholic beverage, which use results in intoxication or in a psychological or physiological dependency from continued use, which dependency induces a mental, emotional or physical impairment and which causes socially dysfunctional behavior  
630.005(2)

### **Drug abuse**

the use of any drug without compelling medical reason, which use results in a temporary mental, emotional or physical impairment and causes socially dysfunctional behavior, or in psychological or physiological dependency resulting from continued use, which dependency induces a mental, emotional or physical impairment and causes socially dysfunctional behavior 630.005(12)

### **Likelihood of Serious Harm**

means any one or more of the following but does not require actual physical injury to have occurred:

(a) A substantial risk that serious physical harm will be inflicted by a person upon his own person, as evidenced by recent threats, including verbal threats, or attempts to commit suicide or inflict physical harm on himself. Evidence of substantial risk may also include information about patterns of behavior that historically have resulted in serious harm previously being inflicted by a person upon himself;

(b) A substantial risk that serious physical harm to a person will result or is occurring because of an impairment in his capacity to make decisions with respect to his hospitalization and need for treatment as evidenced by his current mental disorder or mental illness which results in an inability to provide for his own basic necessities of food, clothing, shelter, safety or medical care or his inability to provide for his own mental health care which may result in a substantial risk of serious physical harm. Evidence of that substantial risk may also include information about patterns of behavior that historically have resulted in serious harm to the person previously taking place because of a mental disorder or mental illness which resulted in his inability to provide for his basic necessities of food, clothing, shelter, safety or medical or mental health care; or

(c) A substantial risk that serious physical harm will be inflicted by a person upon another as evidenced by recent overt acts, behavior or threats, including verbal threats, which have caused such harm or which would place a reasonable person in reasonable fear of sustaining such harm. Evidence of that substantial risk may also include information about patterns of behavior that historically have resulted in physical harm previously being inflicted by a person upon another person; 632.005(9)

## GUIDELINES FOR COMPLETING APPLICATIONS

- *DMH 132* is the Application used by **facility designees** for 96 hour imminent harm commitments for alcohol and drug abuse.
- *DMH 133* is the Application used by facility designees for a voluntary client requesting release.
- “RESPONDENT” means the person who is the subject of the involuntary detention proceedings.
- Begin your Application by providing identifying information about the respondent.
- Provide facts that support the belief that the respondent is an abuser of alcohol or drugs or both.
- Provide facts that support the belief that the respondent presents a likelihood of serious harm.
- Summarize the information provided on the affidavits.
- The Application must state facts and witnessed behaviors, not hearsay or predictions. Timeframes in which behaviors occurred should be specified. Avoid the use of the words “I believe” or “I think” in an Application. Review the Guidelines for Completing Affidavits.
- Attach the Affidavits (*DMH 142*) and the List of Witnesses (*DMH 137*).
- Write only on the front of the Application form.
- Applications must be notarized.
- The Application becomes part of the court file and medical record which are accessible to the client if the client requests to see it. There is no guarantee of confidentiality.

## GUIDELINES FOR COMPLETING AFFIDAVITS

- *DMH 142* is the Affidavit used for alcohol and drug abuse involuntary commitments and is executed under oath.
- "RESPONDENT" means the person who is the subject of the involuntary detention proceedings.
- Begin your Affidavit by identifying your relationship to the respondent.
- Affidavits must state facts and witnessed behaviors, not hearsay or predictions. Timeframes in which behaviors occurred should be specified.
- An Affidavit should address issues of alcohol and drug abuse and likelihood of serious harm
- Avoid the use of the words "I believe" or "I think" in Affidavits.
- Generally, an Affidavit should answer the questions: who, what, when, where, and how.
- Describe those behaviors (including verbal statements) you have witnessed which suggest the person may be an abuser of alcohol or drugs or both.
- Describe those behaviors (including verbal statements) you have witnessed which suggest the person may be harmful to himself or others. Each statement should be no longer than one or two sentences.
- Write only on the front of the Affidavit form.
- Affidavits must be notarized.
- The Affidavit becomes part of the court file and medical record which are accessible to the client if the client requests to see it. There is no guarantee of confidentiality.
- Some probate courts may require more than one Affidavit in certain situations.

## GUIDELINES FOR COMPLETING THE LIST OF WITNESSES

- *DMH 137* is the List of Witnesses used for alcohol and drug abuse involuntary commitments.
- Provide the names, addresses and telephone numbers of prospective witnesses who executed an Affidavit, who may testify or who may have knowledge about the person referred for commitment.
- The name of the attorney who will represent the respondent does not need to be provided at the time the application is filed. This will be determined later and the List of Witnesses forwarded to the attorney. The person filing the Application does not need to be concerned about this.
- The List of Witnesses becomes part of the court file and medical record and is accessible to the individual if the individual requests to see it. There is no guarantee of confidentiality.
- Including someone on the List of Witnesses does not mean that person will have to complete an Affidavit or have to testify.
- Anyone not on the List of Witnesses may not be allowed to provide testimony.

## ADMISSION OF 96 HOUR COMMITMENTS: INFORMATION PROVIDED AND TIME LIMITS

Within **3 hours** of arriving at an alcohol and drug abuse facility, the person shall be given a copy of the **application for involuntary commitment** (*DMH 128, DMH 132 or DMH 133 Application*), the **notice of admission** (*DMH 138 Notice of Admission of Involuntary Patient*) which gives the date and time of the admission and the name of the attorney who will represent the person and the **notice of rights** (*DMH 145 Notice of Rights of Involuntary Patient*).

Within **3 hours**, if requested, the person shall also be given assistance in contacting the appointed or other attorney.

Within **24 hours** (excluding weekends and legal holidays) of a person's detention at an alcohol and drug abuse, the head of the facility shall file with the court the **application for involuntary commitment** (*DMH 128, DMH 132 or DMH 133 Application*), the **notice of admission** (*DMH 138 Notice of Admission of Involuntary Patient*) and the **notice of rights** (*DMH 145 Notice of Rights of Involuntary Patient*) signed by the facility to prove the notice was given. Copies shall be provided to the probate court, the client, the client's attorney and the Department of Mental Health Central Office.

See the [Quick Reference Guide for Civil Involuntary Detention](#) and the [Quick Reference Guide for Civil Involuntary Detention Forms](#) for further discussion.

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631.130. Within three hours after the arrival of the respondent at an alcohol or drug abuse facility, the respondent shall be given a copy of the application for detention; a notice of rights as set out in section 631.135; and a notice giving the name, business address, and telephone number of an attorney appointed to represent him, and assistance in contacting the attorney if so requested.

632.315. Any mental health facility accepting a respondent pursuant to section 632.310 shall be furnished a copy of the application for initial detention and evaluation. If a person is involuntarily detained in a mental health facility pursuant to section 632.310, no later than twenty-four hours after his arrival, excluding Saturdays, Sundays and legal holidays, the head of the mental health facility or the mental health coordinator shall file with the court the application, a copy of the notice required by section 632.325 and proof that the notice was given. The person's designated attorney shall receive a copy of all documents. The head of the mental health facility shall send copies of all completed applications, whether accepted for admission or not, to the designated mental health coordinator for the region.

See 631.175.

## NOTICE OF RIGHTS

If the person is accepted for 96 hour detention at an alcohol and drug abuse facility, the facility must provide the person with the **notice of rights** (*DMH 145 Notice of Rights of Involuntary Patient*). A staff member must have the person read the rights in the presence of the staff member, or the staff member must read the rights to the person and answer any questions of the person. The staff member must sign the form. These rights include notice that:

- (1) The person may be detained for ninety-six hours from the time of the initial detention to be evaluated and treated;
- (2) Within the ninety-six hours, the head of the alcohol and drug abuse facility may file a petition to have the person detained for an additional period not to exceed thirty days, after a court hearing;
- (3) The person will be given a judicial hearing within two judicial days after the day the petition for additional detention is filed;
- (4) An attorney has been appointed who will represent the person before and after the hearing and who will be notified as soon as possible; provided, however, that the person also has the right to private counsel of the person's own choosing and own expense;
- (5) The person has the right to communicate with counsel at all reasonable times and to have assistance in contacting such counsel;
- (6) The purpose of the evaluation is to determine whether the person meets the criteria for civil detention and that anything the person says to personnel at the facility may be used in making that determination, may result in involuntary detention proceedings being filed against the person and may be used at the court hearing;
- (7) The person has the right to present evidence and to cross-examine witnesses who testify against the person at the hearing;
- (8) During the period prior to being examined by a licensed physician, the person may refuse medication unless the person presents an imminent likelihood of serious physical injury to self or others;
- (9) The person has the right to refuse medication except for lifesaving treatment beginning twenty-four hours prior to the hearing for thirty day detention;
- (10) The person has the right to request that the hearing be held in his county of residence if the person is a resident of this state;
- (11) The person has the right to have an interpreter assist the person to communicate, at the facility or during the hearing, or both, if the person has impaired hearing or does not speak English.

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See 631.135

## **ADDITIONAL INPATIENT DETENTION BEYOND 96 HOURS**

Additional information regarding civil involuntary detention beyond 96 hours can be found in the Quick Reference Guide for Civil Involuntary Detention and in the Quick Reference Guide for Civil Involuntary Detention Forms.

## **LIABILITY**

### **No liability for health care professionals, public officials and certain peace officers**

632.440. No officer of a public or private agency, mental health facility or mental health program; no head, attending staff or consultant of any such agency, facility or mental health program; no mental health coordinator, registered professional nurse, licensed physician, mental health professional nor any other public official performing functions necessary for the administration of this chapter; no peace officer responsible for detaining a person pursuant to this chapter; and no peace officer responsible for detaining or transporting, or both, any person upon the request of any mental health coordinator pursuant to section 632.300 or 632.305 or acting pursuant to the request of a guardian who is acting pursuant to chapter 475, RSMo, or upon the request of the head of any supervisory mental health program who is acting pursuant to section 632.337, regardless of whether such peace officer is outside the jurisdiction for which he serves as a peace officer during the course of such detention or transportation, or both, shall be civilly liable for detaining, transporting, conditionally releasing or discharging a person pursuant to this chapter or chapter 475, RSMo, at or before the end of the period for which the person was admitted or detained for evaluation or treatment so long as such duties were performed in good faith and without gross negligence.

### **No liability for petitioners**

632.445. No person making or filing an application alleging that a person should be involuntarily detained, certified or committed, treated or evaluated pursuant to this chapter shall be rendered civilly or criminally liable if the application was made and filed in good faith.

See 631.175

## FORMS

- DMH 132**      **Application for 96 Hour Imminent Harm Admission to a Alcohol and Drug Abuse Facility**
- Used to apply for 96 hour detention for alcohol and drug abuse
  - Completed by Facility Designee
  - Must have Affidavits (DMH 142) and Witness List (DMH 137) attached
  - Must be notarized
  - Presented to the Head of the Facility
  - Copies sent within 24 hours to the Probate Court, Client, Client's Chart, Client's Attorney, and Department of Mental Health
- DMH 133**      **Application for 96 Hour Detention, Evaluation, and Treatment/Rehabilitation of a Voluntary Patient Requesting Release**
- Used to apply for 96 hour detention for alcohol and drug abuse for a voluntary client who is requesting release
  - Completed by Facility Designee
  - Must have Affidavits (DMH 142) and Witness List (DMH 137) attached
  - Must be notarized
  - Presented to the Head of the Facility
  - Copies sent within 24 hours to the Probate Court in the county where the facility is, Client, Client's Chart, Client's Attorney, and Department of Mental Health
- DMH 137**      **List of Witnesses**
- Completed for all 96 hour applications—Imminent Harm and Voluntary to Involuntary for alcohol and drug abuse
  - Completed by the applicant
  - Lists names, addresses and telephone numbers of any prospective witnesses
  - Presented to the Head of the Facility with a DMH 132 or DMH 133 Application
  - Copies sent to the Probate Court in the county where the facility is, Client, Client's Chart, Client's Attorney, and Department of Mental Health
- DMH 142**      **Affidavit in Support of Application for Detention, Evaluation and Treatment/Rehabilitation –**
- Used to support an application (DMH 128, DMH 132, DMH 133) for 96 hour detention for alcohol and drug abuse
  - Completed by any adult person
  - Describes the behavior which supports that the client presents a likelihood of serious harm as the result of alcohol and drug abuse.
  - Must describe behavior that supports ① the presence of alcohol or drug abuse or both and ② the likelihood of harm as the result of the alcohol or drug abuse.
  - Must be notarized
  - Presented to the Head of the Facility with a DMH 132 or DMH 133 Application
  - Copies sent to the Probate Court in the county where the facility is, Client's Chart, Client's Attorney, and Department of Mental Health



STATE OF MISSOURI  
 DEPARTMENT OF MENTAL HEALTH  
**APPLICATION FOR 96 HOUR IMMINENT HARM ADMISSION  
 TO A MENTAL HEALTH OR ALCOHOL AND DRUG ABUSE FACILITY**

(A MENTAL HEALTH FACILITY/ALCOHOL OR DRUG ABUSE FACILITY)

The applicant is a \_\_\_\_\_ who may complete this application under Section 632.305.4, RSMo. or Section 631.120.1 RSMo.

The applicant herein states that \_\_\_\_\_ he has reason to believe that the respondent, \_\_\_\_\_, age \_\_\_\_\_, birthdate \_\_\_\_\_, gender  Male  Female, who resides at \_\_\_\_\_

STREET CITY COUNTY STATE ZIP CODE  
 is mentally disordered/abuses alcohol or drugs or both as defined by law and presents an imminent likelihood of serious harm to himself or others, and thus is in need of detention, evaluation and treatment/rehabilitation in a mental health/alcohol or drug abuse facility. Such belief is based upon the facts which have been derived from the applicant's personal observation and/or investigation.

1. The facts that support the applicant's belief that the respondent is mentally disordered/abuses alcohol or drugs or both are:

2. The facts that support the applicant's belief that the respondent presents an imminent likelihood of serious harm are:

Attached hereto and incorporated herein are the names and addresses of persons known to the applicant to have personal knowledge of said facts.

WHEREFORE, the applicant requests the mental health/alcohol or drug abuse facility to admit \_\_\_\_\_ for detention, evaluation and treatment/rehabilitation for a period not to exceed 96 hours pursuant to Chapter 632 RSMo. or Chapter 631, RSMo.

APPLICANT		DATE	05/30/2008
ADDRESS		TELEPHONE	
NOTARY PUBLIC EMBOSSE OR BLACK INK RUBBER STAMP SEAL	STATE OF	COUNTY (OR CITY OF ST. LOUIS)	
	SUBSCRIBED AND SWORN BEFORE ME, THIS		<b>USE RUBBER STAMP IN CLEAR AREA BELOW.</b>
	DAY OF	YEAR	
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES	
NOTARY PUBLIC NAME (TYPED OR PRINTED)			



**APPLICATION FOR 96 HOUR DETENTION, EVALUATION AND TREATMENT/  
REHABILITATION OF A VOLUNTARY PATIENT REQUESTING RELEASE**

NO. \_\_\_\_\_

TO: \_\_\_\_\_  
MENTAL HEALTH FACILITY/ALCOHOL OR DRUG ABUSE FACILITY

The applicant herein states the following:

1. The respondent is a voluntary patient who has requested h\_\_\_\_\_ release from \_\_\_\_\_ a mental health facility/alcohol or drug abuse facility.
2. The applicant is a \_\_\_\_\_ who may complete this application pursuant to Sections 632.150 or 632.155, RSMo/Section 631.120 RSMo.
3. The head of the facility, \_\_\_\_\_, has determined that \_\_\_\_\_ is mentally disordered/alcohol or drug abuser and as a result a likelihood of serious harm to h\_\_\_\_\_self or others and therefore has refused the patient's request for release.
4. The applicant herein states that \_\_\_\_\_he has reason to believe that the respondent, \_\_\_\_\_, age \_\_\_\_\_, who is presently a patient at \_\_\_\_\_, a mental health/alcohol or drug abuse facility is suffering from a mental disorder/alcohol or drug abuse and presents a likelihood of serious harm to h\_\_\_\_\_self or others and thus is in need of detention, evaluation and treatment in a mental health/alcohol or drug abuse facility. Such belief is based upon facts derived from the applicant's personal observation and/or investigation.
5. The facts that support the applicant's belief that the respondent is mentally disordered/alcohol or drug abuser are:
  
6. The facts that support the applicant's belief that the respondent presents a likelihood of serious harm are:

Attached hereto and incorporated herein are the names and addresses of persons known to the applicant to have personal knowledge of said facts.

WHEREFORE, the applicant requests the mental health/alcohol or drug abuse facility to admit \_\_\_\_\_ for detention, evaluation and treatment/rehabilitation for a period not to exceed 96 hours pursuant to Chapter 632 RSMo/Chapter 631, RSMo.

APPLICANT			TELEPHONE		
STREET		CITY	COUNTY	STATE	ZIP CODE
NOTARY PUBLIC EMBOSSE OR BLACK INK RUBBER STAMP SEAL	STATE OF		COUNTY (OR CITY OF ST. LOUIS)		
	SUBSCRIBED AND SWORN BEFORE ME, THIS				
	DAY OF		YEAR		
	<b>USE RUBBER STAMP IN CLEAR AREA BELOW.</b>				
NOTARY PUBLIC SIGNATURE		MY COMMISSION EXPIRES			
NOTARY PUBLIC NAME (TYPED OR PRINTED)					





STATE OF MISSOURI  
DEPARTMENT OF MENTAL HEALTH

**AFFIDAVIT IN SUPPORT OF APPLICATION FOR DETENTION, EVALUATION  
AND TREATMENT/REHABILITATION - ADMISSION FOR 96 HOURS**

IN THE MATTER OF \_\_\_\_\_, RESPONDENT,  
A PERSON ALLEGED TO BE MENTALLY DISORDERED.

\_\_\_\_\_, HEREBY AFFIRMS AN OATH AS FOLLOWS:  
(Describe the behavior which respondent exhibits which supports the conclusion that respondent is mentally disordered or an alcohol or drug abuser and presents a likelihood of serious harm to himself or others.)

NAME (SIGNATURE)

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

NOTARY PUBLIC EMBOSSE OR  
BLACK INK RUBBER STAMP SEAL

STATE OF

COUNTY (OR CITY OF ST. LOUIS)

SUBSCRIBED AND SWORN BEFORE ME, THIS

DAY OF

YEAR

**USE RUBBER STAMP IN CLEAR AREA BELOW.**

NOTARY PUBLIC SIGNATURE

MY COMMISSION  
EXPIRES

NOTARY PUBLIC NAME (TYPED OR PRINTED)