Community Recovery Program

Recovery is not only possible, it is expected.

MARTINSVILLE
705A Starling Ave
Martinsville, VA 24112
Ph: (276) 638-0438
Fax: (276) 638-0439

FRANKLIN COUNTY
235 Claiborne Avenue, Ste 300
Rocky Mount, VA 24151
Ph: (540) 238-2311
BY APPOINTMENT ONLY

Referral Sheet

Date:_____ DOB:_____ Age:_____

Name:_____ SSN:_____

Mailing Address:_____
Street City State ZIP

Gender:_____ Race:_____ Marital Status:_____

Home Ph:_____ ____Cell Ph:_____ Alt Ph:_____

Is the person abstinent from all drugs, including alcohol? _____YES _____NO

Is the person employed? _____YES _____NO

If yes: Name of Employer:_____

____Full-Time _____Part-Time _____"under the table" ____temporary

Did the person receive a High School Diploma or GED? _____YES _____NO

Is the person currently a student? _____YES _____NO

Is the person a veteran? _____ YES _____ NO

Referral Source Information:

Name & Agency:_____

Ph:_____Fax:_____

Email:_____

Notes: