

FIRST STEP FARM of WNC, INC.

P. O. Box 1450
Candler, NC 28715
(828) 667-0587 Central Office
(828) 667-0303 Women's Facility
(828) 665-5604 Men's Facility

REFERRAL CLIENT DATA FORM

Client Name: _____ DOB: _____ Age: _____
Last First MI Maiden mm/dd/yy

Address: _____ Phone #: _____ (home)

City State Zip _____ (work or cell)

SSN: _____ Referring Agency: _____

Axis I: _____ Therapist: _____

Axis I: _____ Therapist's Phone #: _____

Axis I/II: _____ Agency FAX #: _____

Axis III: _____ Medication(s)/ Reason: _____

Axis III: _____

Axis III: _____

Legal Status: (Please circle): _____

N/A Charges Pending Court Pending Supervised Probation

Charges: _____ Probation Office #: _____

_____ Probation Officer: _____

Date Client will be available: _____

Method of Transportation (Please circle): Bus Friend Family Referring Agency