



Mental Health Resource Connection

PH: 937-641-4780 • Fax: 937-641-4500

One Children's Plaza • Dayton, OH 45404-1815 • childrensdayton.org

PLEASE PRINT (ALL INFORMATION IS REQUIRED)

Date of Request: _____

PATIENT INFORMATION

Patient's name: _____

M ☐ F ☐

DOB: _____

Parent/Guardian Name(s): _____

Home phone: _____

Work phone: _____

Cell phone: _____

Preferred contact phone ☐ work ☐ cell ☐ home

Email address: _____

Address: _____

City: _____ State: _____ Zip: _____

1st Insurance: _____

2nd Insurance: _____

Preferred Language: _____

REFERRING PRACTITIONER INFORMATION

Office name: _____

Provider name: _____

Office location: _____

Office contact person: _____

Phone: _____ Fax: _____

Check One

Patient's name: _____

☐ Counseling

☐ Counseling and Psychiatry

☐ Psychiatry

☐ Testing/Assessment

☐ Other/Specify

Testing/Assessment

☐ ADHD

☐ Education

☐ Other

Brief Description:

Issues of Concern

☐ Abuse/Neglect

☐ Family Problems

☐ ADHD

☐ School Issues

☐ Anxiety

☐ Self Esteem

☐ Bipolar

☐ Substance Abuse

☐ Bullying

☐ Trauma

☐ Depression

☐ Other

Brief Description:

Please fax directly to Mental Health Resource Connection

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