BEFORE THE PSYCHIATRIC SECURITY REVIEW BOARD

OF THE STATE OF OREGON

In the Matter	)	
	)	APPLICATION FOR HEARING BEFORE
of	)	
	)	THE PSYCHIATRIC SECURITY REVIEW BOARD
_____	)	

I. I, _____, request that the Psychiatric Security Review Board conduct a hearing in this case. (If the person requesting the hearing is not the patient, indicate the relation to the person, e.g., attorney, conditional release supervisor, hospital or other: _____)

II. I believe the Board should take the following action at this hearing (may check more than one):

_____ Discharge the person from the jurisdiction of the Board.

_____ Release the person from the hospital on conditional release.

_____ Other:_____

III. The reasons this action should be taken at a hearing are:

_____ The person is no longer affected by a qualifying mental illness.

_____ The person is no longer a substantial danger to others, and there is not a reasonable medical probability of the person becoming dangerous.

_____ The person could be controlled with treatment on conditional release and a conditional release plan is being prepared.

_____ Other:_____

IV. Explain briefly the person's present situation:

_____

_____

_____

_____

Submitted by:_____ Date:_____

If submitted by an Oregon State Hospital attending physician:

Approved by: _____ Date:_____
OSH Superintendent or Designee