

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	ORDER FOR SUBSTANCE ABUSE EVALUATION	CASE NO.
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Court address

Court telephone no.

THE PEOPLE OF

The State of Michigan

v

Defendant's name, address, and telephone no.

The defendant in this case was convicted of an alcohol/controlled substance offense.

On the date of the arrest, _____, the defendant's breath-alcohol content was _____.
Date

IT IS ORDERED:

1. The defendant, at his/her own cost, shall have a substance abuse screening and assessment by _____

_____ Agency name and address

to determine whether the defendant will benefit from rehabilitative services. The agency shall submit a written report to the court

by _____
Date

2. If the defendant is on bond, he/she shall report to the named agency for evaluation by _____
Date

If the defendant fails to report by the above date for evaluation, the court may issue a bench warrant for his/her arrest.

3. Failure to appear for the evaluation may result in sentencing without the benefit of the evaluation.

4. If the defendant is in jail, the evaluation shall be performed either at the jail or at the named agency.

_____ Date

_____ Judge/Magistrate

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received a copy of this order for evaluation on _____
Date

_____ Defendant

NOTICE OF MAILING BY COURT

A copy of this order was mailed to/personally served on the named agency on _____
Date

_____ Date

_____ Signature and title