

REQUEST FOR MENTAL STATUS EVALUATION

TO: BEHAVIORAL HEALTH SERVICES
RWBAHC

FROM: UNIT:
NAME/GRADE:

INSTRUCTIONS: This form must be totally completed in duplicate and forwarded in a sealed envelope (if SM is unaccompanied) to the BHS clinic along with Health Records when trainee or permanent party soldier is referred by unit, DMM, or any other channel. Referring units will be responsible for arranging and/or providing transportation to and from appropriate clinics. For additional information or guidance prior to referral contact BHS at 533-5161/7030.

SECTION 1 - PERSONAL DATA

NAME:		GRADE:		SSN:	
UNIT:		PHONE:	ARRIVAL DATE:	DOB:	ETS DATE:
STATUS: <input type="checkbox"/> RA <input type="checkbox"/> NG <input type="checkbox"/> AR		RECYCLED: <input type="checkbox"/> ES <input type="checkbox"/> IO			
MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED		# OF DEPENDENTS _____			

SECTION 2 - REASON FOR EVALUATION REQUEST OR SERVICES REQUESTED

EMERGENCY
DRILL SGT. EVAL
COUNSELING & SUPPORT
RETENTION
DISCHARGE
BEHAVIORAL MANAGEMENT RECOMMENDATIONS
EMOTIONAL/BEHAVIORAL CONCERNS
OTHER (specify):

SECTION 3 - BEHAVIORAL OBSERVATIONS/CHARACTERISTICS/APPEARANCE (CHECK ALL THAT APPLY)

PASSIVE	NERVOUS	PRIOR PSYCHIATRIC TREATMENT
AGGRESSIVE	SAD	CHRONIC PHYSICAL COMPLAINTS
AFRAID	STRANGE IDEAS	STRANGE BEHAVIOR
CRYING	HEARS VOICES	DOESN'T GET ALONG W/OFF/NCO
SLEEPWALKING	HALLUCINATIONS	DOESN'T MAKE SENSE: CONFUSED
SLEEPLESSNESS	BED WETTING	DOESN'T GET ALONG W/PEERS
SUICIDAL	HOMESICK	HOMICIDAL/VIOLENT

SECTION 4 - UNITS POTENTIAL DISPOSITION

INDIVIDUAL BEING CONSIDERED FOR ADMINISTRATIVE SEPARATION:		YES	NO
PERFORMANCE IN UNIT:	SUPERIOR	ABOVE AVG	AVERAGE MARGINAL BELOW AVG
HAS INDIVIDUAL PERSONALLY DISCUSSED PROBLEM:	YES	NO	IF YES WITH: CO 1SG DRILL SGT PLT SGT OTHER:
DOES INDIVIDUAL DESIRE RETENTION IN ARMY:	YES	NO	UNDECIDED
UCMJ ACTIONS:	ARTICLE 15'S:		
COURT MARTIAL:	OTHER:		
POTENTIAL FOR RETENTION OR CONTINUATION OR TRAINING:	GOOD	FAIR	POOR
DESCRIBE PROBLEM:			
SERVICES REQUESTED:			
DATE:	SOLDIER SIGNATURE:		COMMANDING OFFICER SIGNATURE:

