

THREE-PARTY PETITION SCREENING FORM ALCOHOL DEPENDENCY

IMPORTANT: While the Office of Corporation Counsel helps the public with Three-Party Petitions, petitioners are **not** clients. Information that the public shares with the Office of Corporation Counsel on this screening form is **not** confidential.

SUBJECT OF PETITION:

Subject's Name: _____ Date of Birth: _____
(person in need of treatment)

Address: _____
(include city/state/zip – MUST BE IN WAUKESHA COUNTY)

Phone: _____

PETITIONER INFORMATION:

Petitioner's Name: _____
(person filling out this form)

Relationship to Subject: _____

Address: _____

Email: _____ Phone: _____

HABITUALLY LACKS SELF CONTROL:

Does the subject have a diagnosed alcohol use disorder? Yes No Not Sure

If yes, what disorder(s)? _____

Has the subject had prior residential treatment for alcoholism? Yes No Not Sure

If so, when, and where? _____

Has the subject had prior outpatient treatment for alcoholism? Yes No Not Sure

If so, when, and where? _____

Has the subject been admitted to a detox facility in the last 12 months? Yes No Not Sure
If so, please list the dates and facilities: _____

Is the subject currently prescribed medication(s) to lesson cravings? Yes No Not Sure
If yes, what medication(s)? _____

Has the subject been prescribed medication(s) to lesson cravings in the past?
 Yes No Not Sure

If yes, what medication(s)? _____

What type of alcoholic beverage does the subject use? _____

How often does the subject use? _____

How much does the subject consume during use? _____

Does the subject sneak or hide alcoholic use? _____

Have you personally witnessed the subject's alcoholic use? _____

If so, how many times have you personally seen the subject in a drunken state based on their alcohol use in the last 12 months? _____

As the result of alcohol use, how many times have you personally seen the subject black out in the last 12 months? _____

As the result of alcohol use, how many times have you seen the subject fall in the last 12 months? _____

As the result of alcohol use, have you personally seen the subject neglect self- care in the last 12 months?
 Yes No Not Sure

If so, please explain: _____

Has the person admitted alcohol use to you personally? Yes No Not Sure

If so, what statements has the subject made regarding the use of alcohol? _____

SOCIEO-ECONOMIC DISRUPTION:

Habitual alcohol use itself is not sufficient. To file a Three-Party Petition, petitioners must also have personal knowledge that the subject’s alcoholic use has created a pattern of substantial disruption in the subject’s social or economic functioning.

If applicable, include as much detail on the effect a drug(s) has had on the subject’s social or financial well-being:

Job-related problems due to drinking? _____

School-related problems due to drinking? _____

Money problems? _____

Dependent on others for money? _____

Marital problems due to drinking? _____

Problems with family due to drinking? _____

Loss of friends? _____
