

Approved, SCAO

STATE OF MICHIGAN JUDICIAL CIRCUIT COURT COUNTY	PETITION FOR CONTINUED COMMITMENT FOR TREATMENT OF INFECTIOUS DISEASE AND ORDER TO RECONVENE COMMITMENT REVIEW PANEL	CASE NO.
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In the matter of _____

1. I am director of the _____
Name of facility

2. The above named individual was committed to this facility for a period of _____ by court order
Number of days or months
dated _____.

3. The individual requires continued commitment for the following reasons: _____

I REQUEST that the court issue an order to continue commitment of the individual at the above named facility for a period of _____
Number of days or months and under the conditions set by the court.

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature of director

Address

Name (type or print)

City, state, zip

Telephone no.

ORDER

1. Date of Hearing: _____ Judge: _____

IT IS ORDERED:

2. The previously appointed commitment review panel consisting of _____,
_____, and _____

shall reconvene and report to the court in writing within 14 days of the filing of this petition.

3. The panel shall do the following:
- a. Review the petition and any other information considered relevant by the commitment review panel.
 - b. Interview the individual, or document the reasons why the individual was not interviewed.
 - c. Recommend to the circuit court either termination or continuation of the commitment and document reasons for the recommendation.

Date

Judge

Do not write below this line - For court use only