



# LEARN *of the Jersey Shore*

725 Airport Rd. Lakewood, NJ 08701 • 732-367-5439 • FAX 732-367-8242

## Provider Authorization

Consumer Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Social Security # \_\_\_\_\_

Diagnosis: \_\_\_\_\_ DSM Code: \_\_\_\_\_

Medications:

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Psychiatric Hospitalizations:

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Current Mental Status:

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Under the stresses of school work, what symptoms might occur?

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Signs of Decompensation

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Additional information that may be helpful (Do you believe school is possible and positive for consumer):

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Psychiatrist's Signature

Case Manager/Clinician

Date