

COUNTY OF _____

_____ JUDICIAL CIRCUIT

IN THE MATTER OF _____, An Alleged Alcoholic or Drug Abuser	APPLICATION FOR COURT APPOINTED COUNSEL TO ASSIST IN PETITION FOR INVOLUNTARY COMMITMENT
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_____, applicant, being duly sworn, on oath informs the court as follows:

I am eighteen (18) years of age or older and wholly competent.

I reside at _____, _____ County, South Dakota and is _____ (state relationship) to the above-captioned person.

I believe the above-captioned person is in alcoholic or drug abuser in need of treatment who habitually lacks self-control as to the use of alcoholic beverages or other drugs that he/she

- 1) Has threatened, attempted, or inflicted physical harm on him/herself or on another and that unless committed is likely to inflict harm on him/herself or another; or
- 2) Is incapacitated by the effects of alcohol or drugs.

I request that the court appoint an attorney to represent me and perform the functions of counsel as specified in SDCL 34-20A-70 and SDCL 34-20A-70.1.

I understand that even though the court appoints counsel for this matter, the county shall be reimbursed for such expense by me, if I am a family member and financially able to do so.

Dated this _____ day of _____, _____ at _____, South Dakota.

Applicant

The applicant has appeared before me on the _____ day of _____, 20_____, and has stated under oath that the above-information is true to the best of his/her knowledge.

(Seal)

Clerk of Court
by

Deputy

County